Appendix VIII

Adopting A Physicians' Fee Schedule: Simulated Evaluations of Relative Value Scale and Average Charge Approaches

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ADOPTING A FEE SCHEDULE

One alternative reimbursement mechanism examined in the course of this project was the implementation of a fee schedule for physician services. Fee schedules can take several forms, but the two methods used to construct the schedules analyzed here resulted in an RVS based schedule and a procedure based schedule.

The impact of changing from a CPR to a fee schedule system was simulated with and without a "hold-harmless" provision. As the name implies, "hold-harmless" would set the CPR reimbursement as a floor so that no physician would be paid less for a given service under a fee schedule than under the CPR system.

The following sections will describe the methodology used to construct the fee schedules, the data used in the simulations, and the major findings of the analysis.

RVS Based Schedules

The cost and distributional impacts of adopting a RVS based fee schedule were simulated in the second year of the grant. The simulation used 1978 claims by a sample of solo and group practice physicians and 325 single specialty group practices. Five specialties were included: general practice, general surgery, internal medicine, orthopedic surgery, and ophthamology. The claims included the 390 most frequently performed procedures.

As part of the calculation of fee schedule rates, we examined alternative definitions of area and specialty groupings. These groupings included: statewide, with and without specialty distinctions; and substate, with and without specialty distinctions.

Eight types of fee schedules were simulated combining the four area/specialty combinations with the hold-harmless/no hold-harmless provision. Thus the variation in the schedules reflects whether or not specialty or area distinctions are made in establishing the fee schedule amount, and the variation in the reasonable amounts reflects whether or not the hold-harmless provision is invoked.

The schedules with area differences are developed using nine areas. The areas are listed in Table A. Five are combinations of two PSRO areas which are currently used as Medicare profile areas in California. The areas were combined for simulation purposes to obtain the largest possible number of physicians in each area when calculating the fee schedule amounts. The criteria for combining the areas are that they are contiguous and their differences in average prevailing charges for Medicare procedures is small. The average prevailing charges for each procedure type are also listed in Table A. The 1975 prevailing charges were used because in later years prevailings are computed with specialty distinctions.

For purposes of these simulations, all claims for the selected 390 procedures were aggregated for each physician. The 1969 California Relative Value Study was used to weight procedures in the aggregation. The fee schedules, reasonable charges, etc., are expressed in terms of dollars per RVS unit and quantities are expressed as number of RVS units. Because the California RVS assigns values to procedures that are comparable within procedure category but not across categories, the published RVS values have been converted to a common base in terms of medicine units. The conversion sets values according to the following:

Table A

Simulation Area Groupings

		Average Prevailing Charge Per RVU			
SIMULATION AREA	PROFILE AREAS	MEDICINE	SURGERY	RADIOLOGY	PATHOLOGY
1	01 Rural - North Coastal	.71	34.67	3.52	.31
	02 Rural - North Inland	.70	35.66	3.25	.35
2	04 Sacramento - et al	.71	35.88	3.49	.32
	08 Rural Central Inland	.71	33.97	3.25	.33
3	09 Santa Clara	.78	39.74	3.44	.33
	12 Santa Cruz - Monterey	.75	36.06	3.55	.32
4	10 Rural - Central Inland	.67	34.06	3.30	.32
	11 Fresno Madera	.68	34.12	3.20	.29
5	13 Kings - Tulare	.72	33.65	3.34	.33
	14 Kern	.72	35.36	3.67	.35
6	03 Marin - Napa - Solano	.77	37.41	3.74	.33
7	05 San Francisco	.79	41.33	3.57	.33
8	06 San Mateo	.79	39.68	3.61	.33
9	07 Contra Costa/Alameda	.74	37.51	3.37	.33

1 Surgery Unit = 49.91 Medicine Units
1 Pathology Unit = .52 Medicine Units
1 Radiology Unit = 4.68 Medicine Units

When the hold-harmless provision is in effect, the reasonable is calculated as:

$$R_t^i = \max \left[FS_t, \min (C_t^i, P_t) \right]$$

where: R_t^i is the reasonable charge in year t for physician i,

FS_t is the fee schedule amount in year t,

C_t^i is the customary charge in the base year t for physician i, and

P_t is the prevailing charge in the base year t.

When the hold-harmless provision is eliminated, the reasonable is calculated as: $R_t^i = FS_t$.

Summary information on the impact of imposing fee schedules with a hold-harmless provision is presented in the tables in Section I. Each line in the tables represents a separate fee schedule where the fee schedule amount per RVS unit is set equal to the schedule amount on that line.

The definition for the variables in the tables was:

$$1.\quad \text{Total Cost} = \sum_{i=1}^{I_s} SA * NRVS_i + \sum_{i=I_s+1}^{I} R_i * NRVS_i$$

where SA is the schedule amount, and:

$NRVS_i$ is the number of RVS units supplied by physician i under Medicare in the first quarter of 1978,

R_i is the Medicare reasonable amount for physician i, i.e., $\min (C_{78}^i, P_{78})$,

i = $1, \ldots I_s$ represents the I_s physician whose reasonable amount is less than the schedule amount, and

I_s is the total number of physicians for whom this schedule applies.

It should be noted that total costs are both program and beneficiary coinsurance costs. No adjustments were made for coinsurance or deductibles. In addition, no adjustment was made for billed amounts less than the reasonable or schedule amounts.

2. Percent of Physicians Above Schedule:*

$$(I - I_s)/I$$

3. Percent of RVS Units Above Schedule:

$$\sum_{i=I_s+1}^{I} NRVS_i \Big/ \sum_{i=1}^{I} NRVS_i$$

4. Percent of Services Above Schedule:

$$\sum_{i=I_s\ 1}^{I} NS_i \Big/ \sum_{i=1}^{I} NS_i$$

5. Cumulative Number of Physicians:

$$I - I_s$$

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*The variables listed as "above schedule" include RVS units, services, number of physicians, and costs for which the reasonable amount equals the fee schedule amount. It therefore does not strictly present those greater than the schedule amount.

Table B

Fee Schedule Amount per RVS Unit Set to Equal 1979 and 1980 Expenditures Under the CPR System

	Hold Harmless		No Hold Harmless	
	1979	1980	1979	1980
Statewide - No Specialty	.924	1.015	.945	1.019
Statewide - Specialty				
GP (01)	.893	.982	.912	.983
GS (02)	.944	1.031	.959	1.033
IM (11)	.926	1.015	.943	1.016
OP (18)	.905	.995	.926	.998
OR (20)	1.009	1.107	1.036	1.116
Area - No Specialty				
1	.901	.990	.918	.990
2	.928	1.012	.939	1.013
3	.900	.989	.919	.991
4	.915	.993	.923	.993
5	.955	1.047	.973	1.047
6	.939	1.039	.970	1.045
7	.948	1.047	.983	1.059
8	.981	1.072	.996	1.073
9	.915	1.003	.932	1.005

Table B (continued)

Area - Specialty

	Area 1				Area 2				Area 3			
	Hold Harmless		Without Hold Harmless		Hold Harmless		Without Hold Harmless		Hold Harmless		Without Hold Harmless	
	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980
GP (01)	.908	.998	.926	.998	.904	.988	.916	.988	.882	.964	.896	.966
GS (02)	.925	1.012	.940	1.013	.950	1.034	.960	1.034	.933	1.018	.945	1.019
IM (11)	.889	.975	.904	.976	.926	1.005	.932	1.005	.892	.983	.912	.985
OPHTH (18)	.847	.926	.858	.926	.853	.949	.880	.949	.884	.964	.895	.964
OR. S. (20)	.985	1.062	.986	1.062	1.032	1.114	1.035	1.114	.955	1.046	.972	1.047
	Area 4				Area 5				Area 6			
	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980
GP (01)	.890	.963	.894	.963	.926	1.024	.953	1.025	.862	.952	.885	.955
GS (02)	.940	1.019	.947	1.019	.996	1.075	.999	1.075	1.027	1.117	1.036	1.117
IM (11)	.897	.973	.903	.973	.989	1.069	.993	1.069	.993	1.090	1.006	1.085
OPHTH (18)	.953	1.025	.953	1.025	.828	.918	.853	.918	.900	.970	.900	.970
OR. S. (20)	.996	1.071	.995	1.071	1.044	1.125	1.045	1.125	1.058	1.176	1.097	1.182
	Area 7				Area 8				Area 9			
	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980	1979	1980
GP (01)	.857	.951	.890	.960	.908	.987	.918	.989	.878	.961	.894	.963
GS (02)	.958	1.039	.965	1.039	.999	1.105	1.029	1.108	.917	1.006	.934	1.007
IM (11)	.938	1.014	.942	1.015	1.008	1.086	1.008	1.086	.921	1.007	.934	1.008
OP (18)	1.026	1.107	1.027	1.107	.952	1.025	.952	1.025	.870	.958	.891	.961
OR. S. (20)	1.176	1.285	1.195	1.287	1.017	1.123	1.044	1.124	.962	1.051	.977	1.054

6. Cumulative Number of RVS Units:

$$\sum_{i=I_{s+1}}^{I} NRVS_i$$

7. Cumulative Number of Services:

$$i = \sum_{I_s+1}^{I} NS_i$$

8. Cumulative Cost of Services:

$$\sum_{i=I_s+1}^{I} R_i * NS_i$$

Costs of fee schedules without the hold-harmless provision can be calculated from these tables by multiplying the chosen schedule amount by the cumulative number of RVS units from the last line in each table. The line with the chosen schedule amount indicates the number of physicians and services for whom the reasonable amount will be reduced.

In the second section, the tables display the distributional consequences of fee schedules using schedule amounts selected to be "budget-neutral," that is, the 1979 and 1980 program expenditures under the fee schedule would be equal to those under the CPR system. The fee schedule amounts are presented in Table B. Actual data on 1979 and 1980 billed, customary, and prevailing charges were not available, so the computations are based on inflated 1978 charges. Customary charges were inflated by actual (and projected) 1978 and 1979 changes in the Blue Shield of California professional fee index and the prevailings by the percentage increase allowed according to the economic index. Table C contains the inflation factors for each type charge.

Table C

Formulae for Projecting 1979 and 1980 Physician Charges

	Customary	Prevailing
1979	1.080 * 78 Level	1.051 * 78 Level
1980	1.168 * 78 Level	1.130 * 78 Level

Section I

Cost Tables for Fee Schedules

RVS BASED FEE SCHEDULE SIMULATION
STATEWIDE

SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
1.33	16,783,779	.0	.0	.0	1	7,487	348	9,957
1.29	16,279,303	.1	.0	.0	2	9,238	396	12,215
1.22	15,396,593	.1	.5	.2	3	74,059	1,432	91,279
1.21	15,271,140	.2	.6	.3	4	76,181	1,530	93,865
1.20	15,145,708	.3	.6	.3	5	83,672	1,686	102,854
1.19	15,020,351	.3	.6	.3	6	86,263	1,835	105,938
1.17	14,769,088	.4	.9	.5	7	114,899	2,661	139,442
1.16	14,644,643	.4	.9	.6	8	121,642	3,007	147,264
1.14	14,394,688	.5	.9	.6	10	121,811	3,012	147,456
1.13	14,269,713	.7	1.0	.7	12	137,432	3,528	165,108
1.12	14,144,893	.9	1.2	.8	16	153,198	4,238	182,765
1.11	14,020,231	1.0	1.2	.8	18	158,350	4,398	188,485
1.10	13,895,621	1.2	1.2	.8	21	161,607	4,469	192,067
1.09	13,771,043	1.5	1.5	1.0	25	200,269	5,315	234,209
1.08	13,646,852	1.7	2.0	1.4	29	264,908	7,064	304,019
1.07	13,523,307	1.9	2.2	1.4	33	279,138	7,281	319,245
1.06	13,399,905	2.4	2.3	1.5	41	293,150	7,638	334,038
1.05	13,276,643	3.1	3.0	1.8	53	383,170	9,175	428,619
1.04	13,154,281	3.9	3.6	2.5	66	463,080	12,921	511,725
1.03	13,032,717	5.0	4.8	3.3	83	613,657	16,768	666,823
1.02	12,912,660	6.9	6.0	4.4	116	760,478	22,016	816,577
1.01	12,794,071	8.0	7.1	5.4	143	903,292	27,260	960,813
1.00	12,676,910	12.9	10.1	8.2	200	1,277,815	41,201	1,335,342
.99	12,563,495	14.0	13.5	12.1	247	1,705,775	60,817	1,759,023
.98	12,454,358	18.1	17.4	16.0	301	2,198,403	80,152	2,241,798
.97	12,350,149	21.5	20.6	18.9	357	2,599,992	94,725	2,631,339
.96	12,249,955	24.1	23.4	21.7	401	2,958,116	108,643	2,975,133
.95	12,153,342	27.9	27.3	25.7	463	3,452,774	128,442	3,445,064
.94	12,061,676	31.9	31.1	28.8	529	3,926,302	144,167	3,890,180
.93	11,974,745	35.4	35.8	33.1	588	4,517,785	165,804	4,440,259
.92	11,893,729	39.9	40.8	37.8	663	5,152,554	188,932	5,024,247
.91	11,819,061	44.0	45.4	42.6	740	5,740,495	212,878	5,559,273
.90	11,750,272	49.5	50.3	47.6	821	6,349,679	237,808	6,107,538
.89	11,687,575	53.5	54.0	51.7	888	6,826,383	258,297	6,531,805
.88	11,629,645	56.0	57.2	55.3	943	7,216,767	276,245	6,877,103
.87	11,575,639	60.6	61.7	60.5	1,006	7,794,198	302,332	7,377,729
.86	11,527,387	64.4	66.2	64.8	1,069	8,361,228	324,103	7,865,374
.85	11,484,805	67.7	70.1	69.0	1,124	8,856,590	344,757	8,286,431
.84	11,447,178	70.4	73.4	72.4	1,168	9,268,798	361,973	8,632,685
.83	11,413,672	73.5	75.6	74.7	1,220	9,551,488	373,625	8,867,319
.82	11,382,993	76.2	78.3	77.5	1,265	9,884,910	387,971	9,140,725
.81	11,355,648	79.0	81.2	80.6	1,310	10,248,739	402,845	9,435,426
.80	11,331,942	81.1	83.3	82.4	1,345	10,519,664	411,663	9,652,165
.79	11,310,944	83.4	85.7	84.6	1,384	10,827,227	422,890	9,895,141
.78	11,293,023	85.5	88.5	87.7	1,419	11,178,552	438,132	10,169,175
.77	11,278,615	86.9	90.1	89.4	1,441	11,375,416	446,583	10,320,760
.76	11,266,175	88.3	91.6	91.0	1,475	11,568,552	454,759	10,467,551
.75	11,255,667	91.1	93.1	92.7	1,512	11,752,467	463,467	10,605,480
.74	11,246,997	92.2	93.8	93.6	1,529	11,841,278	467,618	10,671,200
.73	11,235,216	93.7	95.2	95.0	1,554	12,019,827	474,782	10,801,541

RVS BASED FEE SCHEDULE SIMULATION
STATEWIDE

SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
.72	11,233,221	94.3	95.8	95.4	1,564	12,094,268	476,917	10,855,138
.71	11,227,970	95.4	96.6	96.1	1,582	12,201,994	480,266	10,931,624
.70	11,223,796	96.3	97.0	96.5	1,592	12,246,991	482,551	10,963,121
.69	11,220,072	96.8	98.0	97.7	1,602	12,379,451	488,409	11,054,519
.68	11,217,673	97.2	98.3	98.1	1,612	12,412,847	490,087	11,077,228
.67	11,215,607	97.5	98.5	98.3	1,617	12,432,965	491,040	11,090,707
.66	11,213,743	98.1	99.1	98.9	1,628	12,505,928	494,116	11,138,863
.65	11,212,608	98.5	99.2	99.1	1,634	12,528,196	495,045	11,153,337
.64	11,211,697	98.8	99.4	99.3	1,639	12,554,633	496,365	11,170,257
.63	11,211,049	99.2	99.6	99.5	1,645	12,573,917	497,213	11,182,405
.62	11,210,594	99.3	99.7	99.6	1,648	12,589,405	497,814	11,192,008
.61	11,210,295	99.5	99.8	99.7	1,651	12,598,678	498,418	11,197,665
.60	11,210,088	99.9	99.9	99.9	1,657	12,619,311	499,509	11,210,044
.58	11,210,086	100.0	100.0	100.0	1,658	12,619,383	499,512	11,210,086

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Specialty Codes

General Practice	01
General Surgery	02
Internal Medicine	11
Ophthalmology	18
Orthopedic Surgery	20

RVS BASED FEE SCHEDULE SIMULATION
SPECIALTY SPECIFIC

SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
01	1.10	3,403,764	.1	.0	.0	1	90	3	99
01	1.04	3,218,109	.5	1.2	1.5	3	37,336	2,690	38,834
01	1.03	3,187,539	.7	1.2	1.6	4	39,548	2,839	41,113
01	1.02	3,156,991	1.7	1.8	2.4	10	58,223	4,111	60,161
01	1.01	3,126,630	3.0	2.8	3.2	17	89,063	5,485	91,310
01	1.00	3,096,578	4.0	4.3	4.7	23	134,895	8,171	137,142
01	.99	3,066,983	5.6	6.0	6.6	32	188,002	11,334	189,718
01	.98	3,037,920	7.2	8.6	9.2	41	267,518	15,752	267,543
01	.97	3,009,652	9.3	10.4	11.2	53	322,316	19,197	320,777
01	.96	2,981,932	12.0	13.1	14.1	68	407,936	24,231	402,992
01	.95	2,955,068	15.3	16.6	17.9	87	515,079	30,603	504,778
01	.94	2,929,275	18.3	19.9	21.3	104	618,573	36,499	602,053
01	.93	2,904,518	21.5	23.1	24.7	122	716,675	42,284	693,298
01	.92	2,880,741	25.6	27.5	28.7	145	852,273	49,041	818,048
01	.91	2,858,320	30.5	32.0	33.8	173	990,749	57,712	944,061
01	.90	2,837,285	36.9	38.5	40.5	209	1,193,070	69,225	1,126,150
01	.89	2,818,272	42.0	44.8	47.0	238	1,387,689	80,298	1,299,361
01	.88	2,801,206	45.9	47.8	50.0	260	1,479,571	85,490	1,380,217
01	.87	2,785,058	49.4	51.4	53.8	280	1,591,793	91,894	1,477,850
01	.86	2,770,033	53.8	55.7	58.0	305	1,724,668	99,147	1,592,122
01	.85	2,756,336	57.4	58.1	60.4	325	1,800,606	103,222	1,656,670
01	.84	2,743,399	60.4	62.7	65.7	342	1,941,359	112,232	1,774,902
01	.83	2,731,869	65.3	67.5	70.4	370	2,090,283	120,239	1,898,509
01	.82	2,721,829	68.1	71.7	74.1	386	2,219,598	126,611	2,004,548
01	.81	2,713,081	71.3	74.8	77.0	404	2,316,921	131,526	2,093,379
01	.80	2,705,307	75.6	76.6	78.4	417	2,371,274	133,839	2,126,852
01	.79	2,698,077	76.1	79.0	80.4	431	2,447,158	137,291	2,186,810
01	.78	2,691,605	79.1	81.5	83.0	448	2,522,594	141,800	2,245,550
01	.77	2,685,887	81.0	84.5	85.4	459	2,616,600	145,919	2,318,035
01	.76	2,681,110	85.2	86.1	86.9	471	2,667,216	148,373	2,356,503
01	.75	2,676,839	86.3	88.3	88.9	489	2,734,462	151,879	2,406,937
01	.74	2,673,240	87.9	89.6	90.2	498	2,772,535	154,024	2,435,111
01	.73	2,670,022	90.2	91.8	92.2	511	2,842,253	157,363	2,486,005
01	.72	2,667,502	90.8	92.0	92.3	514	2,848,308	157,669	2,490,355
01	.71	2,665,041	91.3	92.8	93.0	517	2,872,422	158,729	2,507,486
01	.70	2,662,822	92.7	93.8	94.0	525	2,904,473	160,550	2,529,922
01	.69	2,660,924	93.9	95.9	95.7	532	2,968,483	163,407	2,574,039
01	.68	2,659,665	95.4	96.9	96.6	540	3,000,845	165,025	2,596,035
01	.67	2,658,730	96.1	97.3	97.0	544	3,013,443	165,719	2,604,535
01	.66	2,657,921	96.9	98.0	98.1	549	3,034,546	167,445	2,618,463
01	.65	2,657,324	97.7	98.5	98.5	553	3,049,171	168,219	2,627,970
01	.64	2,656,872	98.0	98.5	98.5	555	3,049,778	168,249	2,628,359
01	.63	2,656,426	98.7	99.0	98.9	559	3,063,621	168,924	2,637,079
01	.62	2,656,119	98.9	99.0	99.0	560	3,064,785	168,998	2,637,831
01	.61	2,655,824	99.2	99.3	99.3	562	3,073,922	169,594	2,643,374
01	.60	2,655,620	100.0	100.0	100.0	566	3,094,331	170,675	2,655,620

SUBTOTAL 46

RVS BASED FEE SCHEDULE SIMULATION
SPECIALTY SPECIFIC

SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
02	1.13	1,796,729	.3	.5	.4	1	8,220	136	9,288
02	1.12	1,780,911	.9	.7	.5	3	11,182	195	12,606
02	1.11	1,765,122	1.2	.8	.6	4	12,784	217	14,334
02	1.10	1,749,350	1.5	.9	.7	5	14,325	259	16,079
02	1.09	1,733,593	1.8	1.3	1.0	6	21,584	337	23,931
02	1.07	1,702,224	2.7	2.0	1.4	9	32,687	485	35,871
02	1.06	1,686,651	3.6	2.3	1.5	12	36,737	521	40,164
02	1.05	1,671,118	5.1	3.9	3.6	17	62,849	1,206	67,582
02	1.04	1,655,846	6.6	4.9	5.1	22	79,032	1,713	84,412
02	1.03	1,640,736	8.4	6.4	6.4	28	102,061	2,148	108,132
02	1.02	1,625,856	10.5	7.6	7.6	35	122,163	2,531	128,636
02	1.01	1,611,178	13.2	9.0	8.7	44	144,076	2,897	150,758
02	1.00	1,596,718	15.9	11.0	10.9	53	175,019	3,647	181,711
02	.99	1,582,568	18.3	13.1	13.5	61	209,518	4,515	215,865
02	.98	1,568,763	21.9	16.1	15.3	73	256,138	5,094	261,553
02	.97	1,555,424	27.1	21.5	20.7	90	342,982	6,902	345,792
02	.96	1,542,954	31.0	26.0	25.8	103	414,743	8,614	414,682
02	.95	1,531,201	36.7	31.7	30.6	122	505,516	10,202	500,917
02	.94	1,520,356	43.0	38.6	37.0	143	614,056	12,333	602,944
02	.93	1,510,596	46.9	42.5	40.1	156	676,925	13,352	661,412
02	.92	1,501,465	52.1	48.9	44.4	173	778,753	14,802	755,074
02	.91	1,493,353	55.9	54.4	49.3	189	866,131	16,433	834,608
02	.90	1,486,114	60.8	60.9	55.0	202	969,792	18,319	927,933
02	.89	1,479,911	64.7	64.7	58.2	215	1,028,891	19,405	990,501
02	.88	1,474,300	67.4	67.3	60.5	224	1,071,618	20,146	1,018,131
02	.87	1,469,116	71.0	70.0	62.1	236	1,113,267	20,686	1,054,335
02	.86	1,464,348	74.3	73.2	65.6	247	1,165,087	21,838	1,098,931
02	.85	1,460,099	77.4	76.2	70.0	257	1,212,551	23,303	1,139,245
02	.84	1,456,324	78.6	78.2	73.2	261	1,243,700	24,367	1,165,410
02	.83	1,452,861	81.0	81.1	75.3	269	1,290,818	25,069	1,204,518
02	.82	1,449,869	84.0	83.0	77.3	279	1,320,051	25,754	1,228,489
02	.81	1,447,169	86.7	85.8	82.2	288	1,365,325	27,383	1,265,151
02	.80	1,444,922	87.9	87.7	84.0	292	1,395,665	27,965	1,289,433
02	.79	1,442,578	90.9	91.9	88.5	302	1,461,808	29,485	1,341,696
02	.78	1,441,656	91.5	93.0	89.1	304	1,480,003	29,674	1,355,878
02	.77	1,440,596	91.8	93.7	90.5	305	1,490,893	30,149	1,364,254
02	.76	1,439,605	92.4	93.9	90.7	307	1,493,706	30,209	1,366,431
02	.75	1,438,641	93.6	94.8	92.1	311	1,507,967	30,669	1,377,037
02	.74	1,437,821	93.9	95.1	93.0	312	1,513,664	30,984	1,381,313
02	.73	1,437,057	95.7	96.4	95.3	318	1,532,916	31,736	1,395,357
02	.72	1,436,486	96.0	97.0	96.3	319	1,542,414	32,078	1,402,205
02	.71	1,436,010	97.8	99.1	98.6	325	1,577,072	32,845	1,426,813
02	.68	1,435,621	98.1	99.2	98.8	326	1,578,016	32,903	1,427,455
02	.66	1,435,381	98.7	99.9	99.9	328	1,589,437	33,264	1,434,992
02	.64	1,435,369	99.0	99.9	99.9	329	1,589,786	33,274	1,435,216
02	.63	1,435,367	99.3	99.9	99.9	330	1,589,818	33,276	1,435,236
02	.61	1,435,363	99.6	99.9	99.9	331	1,589,954	33,284	1,435,319
02	.58	1,435,361	100.0	100.0	100.0	332	1,590,026	33,287	1,435,361

SUBTOTAL 48

RVS BASED FEE SCHEDULE SIMULATION
SPECIALTY SPECIFIC

SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
11	1.21	6,514,953	.2	.0	.0	1	2,122	136	2,557
11	1.16	6,245,846	.4	.1	.1	2	8,865	482	10,399
11	1.14	6,138,338	.6	.1	.1	3	8,935	483	10,459
11	1.13	6,084,585	.8	.3	.3	4	16,336	863	18,832
11	1.12	6,030,906	1.0	.5	.5	5	27,611	1,437	31,453
11	1.09	5,870,206	1.2	.5	.5	6	27,661	1,438	31,514
11	1.08	5,816,640	1.6	.7	.7	8	37,911	1,928	42,594
11	1.06	5,709,713	2.4	.7	.8	12	39,453	2,095	44,219
11	1.05	5,656,265	2.8	.7	.8	14	40,375	2,138	45,187
11	1.04	5,602,826	3.0	.7	.8	15	40,635	2,144	45,457
11	1.03	5,549,390	3.8	1.3	1.5	19	73,568	3,757	79,378
11	1.02	5,496,283	7.0	2.5	2.6	35	137,154	6,611	144,236
11	1.01	5,443,812	8.5	3.9	3.9	42	210,215	9,904	218,028
11	1.00	5,392,072	14.7	7.1	7.2	73	385,646	18,110	393,459
11	.99	5,342,086	19.4	12.2	12.9	96	657,125	32,332	662,223
11	.98	5,294,814	24.2	17.4	18.2	120	941,735	45,448	941,141
11	.97	5,250,389	27.5	20.1	20.9	136	1,083,840	52,367	1,078,983
11	.96	5,207,385	29.9	22.5	23.3	148	1,214,102	58,343	1,204,034
11	.95	5,165,683	33.6	26.8	27.4	166	1,443,651	68,441	1,422,136
11	.94	5,126,277	36.4	28.7	29.4	180	1,550,345	73,407	1,522,338
11	.93	5,087,938	39.8	33.3	33.9	197	1,795,711	84,663	1,750,588
11	.92	5,052,053	44.7	38.1	38.9	221	2,054,818	97,208	1,948,957
11	.91	5,018,758	49.1	42.9	43.9	243	2,313,479	109,591	2,224,348
11	.90	4,988,050	53.6	47.2	48.1	265	2,545,339	120,033	2,433,322
11	.89	4,959,661	55.8	50.2	50.9	281	2,706,508	127,061	2,576,453
11	.88	4,932,884	60.3	54.4	55.4	298	2,930,526	138,400	2,773,599
11	.87	4,908,346	64.9	61.2	62.7	321	3,296,239	156,531	3,091,759
11	.86	4,887,466	68.0	65.7	67.4	336	3,540,347	168,190	3,301,702
11	.85	4,869,027	72.2	72.1	73.2	357	3,883,134	182,826	3,593,071
11	.84	4,854,016	74.4	74.4	75.4	368	4,009,917	188,207	3,699,559
11	.83	4,840,272	76.1	75.5	76.3	376	4,068,407	190,614	3,748,115
11	.82	4,827,114	78.7	78.2	79.0	389	4,214,518	197,300	3,867,926
11	.81	4,815,416	81.1	81.4	81.9	401	4,387,023	204,526	4,037,655
11	.80	4,805,444	83.4	83.3	83.8	412	4,488,202	209,125	4,088,598
11	.79	4,796,484	85.4	85.1	85.7	422	4,585,846	213,993	4,165,737
11	.78	4,788,499	88.0	89.6	89.8	435	4,825,779	224,176	4,352,985
11	.77	4,782,915	89.6	91.1	91.3	443	4,908,799	227,882	4,416,810
11	.76	4,778,160	92.3	93.1	93.4	456	5,014,768	233,077	4,497,347
11	.75	4,774,465	93.9	94.8	95.1	464	5,104,966	237,455	4,564,335
11	.74	4,771,672	94.9	95.4	95.7	469	5,140,183	238,979	4,591,056
11	.73	4,769,231	95.7	96.5	96.8	473	5,197,557	241,709	4,632,933
11	.72	4,767,364	96.3	96.9	97.2	476	5,219,332	242,595	4,648,617
11	.71	4,765,715	97.5	97.5	97.7	482	5,250,076	243,840	4,670,445
11	.70	4,764,373	97.7	97.6	97.8	483	5,257,318	244,174	4,675,515
11	.69	4,763,104	98.3	98.9	99.0	486	5,325,768	247,165	4,722,745
11	.67	4,761,934	98.5	99.0	99.1	487	5,333,288	247,424	4,727,733
11	.66	4,761,424	99.1	99.4	99.4	490	5,354,161	248,226	4,741,563
11	.64	4,760,822	99.3	99.7	99.7	491	5,369,815	248,987	4,751,578
11	.62	4,760,533	99.7	99.9	99.9	493	5,384,139	249,514	4,760,459
11	.60	4,760,531	100.0	100.0	100.0	494	5,384,259	249,520	4,760,531

SUBTOTAL 53

RVS BASED FEE SCHEDULE SIMULATION
SPECIALTY SPECIFIC

SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
18	1.04	1,294,358	1.4	1.4	1.9	2	17,626	418	18,331
18	1.03	1,282,088	2.2	4.6	4.8	3	57,458	1,055	59,358
18	1.02	1,270,217	3.7	6.7	6.4	5	83,512	1,407	85,943
18	1.01	1,258,606	4.4	7.1	6.8	6	89,379	1,490	91,858
18	1.00	1,247,054	6.7	11.1	9.5	9	138,548	2,098	141,027
18	.99	1,235,994	7.4	11.3	9.7	10	141,110	2,133	143,564
18	.98	1,224,959	8.2	11.6	10.0	11	144,472	2,206	146,858
18	.97	1,213,958	11.1	14.5	13.2	15	180,970	2,892	182,251
18	.95	1,192,686	12.6	16.5	16.3	17	206,238	3,567	206,256
18	.94	1,182,303	17.1	23.3	23.7	23	291,188	5,193	286,119
18	.93	1,172,769	20.1	32.7	33.7	27	408,022	7,376	394,775
18	.92	1,164,403	25.8	35.5	37.4	32	441,872	8,191	425,917
18	.91	1,156,376	27.6	40.9	40.4	37	509,204	8,849	497,189
18	.90	1,149,023	33.5	45.8	44.3	45	570,367	9,692	542,235
18	.89	1,142,281	38.8	50.0	49.6	52	622,789	10,854	588,891
18	.88	1,136,063	42.5	52.5	52.4	57	653,965	11,480	616,326
18	.87	1,130,157	46.2	55.8	55.0	62	695,585	12,254	652,535
18	.86	1,124,667	50.7	62.8	59.7	68	782,002	13,069	726,854
18	.85	1,120,041	52.9	65.0	61.8	71	809,986	13,516	750,640
18	.84	1,115,695	58.9	68.0	64.9	79	846,770	14,201	781,539
18	.83	1,111,717	64.1	70.2	67.3	86	874,279	14,723	804,371
18	.82	1,108,014	67.1	72.3	69.9	90	900,756	15,298	826,093
18	.81	1,104,576	71.6	76.2	75.0	96	949,483	16,402	865,551
18	.80	1,101,625	75.3	81.8	80.0	101	1,018,127	17,496	920,457
18	.79	1,099,361	78.3	95.1	84.5	105	1,059,143	18,408	952,869
18	.78	1,097,506	79.1	85.6	85.2	106	1,066,196	18,645	958,371
18	.77	1,095,722	80.5	86.3	85.9	108	1,075,144	18,796	965,261
18	.76	1,094,028	83.5	87.3	86.7	112	1,087,554	18,982	974,692
18	.75	1,092,458	87.3	88.3	88.2	117	1,098,984	19,307	983,265
18	.74	1,091,002	88.8	89.0	89.0	119	1,108,808	19,474	990,534
18	.73	1,089,644	90.2	91.6	90.6	121	1,141,013	19,817	1,014,044
18	.72	1,088,609	92.5	94.6	93.3	124	1,178,126	20,418	1,040,765
18	.71	1,087,944	94.7	96.1	94.6	127	1,196,336	20,695	1,053,635
18	.70	1,087,462	95.5	96.5	95.2	128	1,202,040	20,835	1,057,687
18	.68	1,086,611	96.2	96.5	95.2	129	1,202,130	20,837	1,057,749
18	.66	1,085,762	97.0	98.1	96.1	130	1,221,696	21,024	1,070,652
18	.65	1,085,533	98.5	98.7	96.8	132	1,229,339	21,179	1,075,630
18	.64	1,085,381	99.2	99.5	99.2	133	1,239,166	21,698	1,081,919
18	.63	1,085,327	100.0	100.0	100.0	134	1,244,575	21,869	1,095,327

SUBTOTAL 39

SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
20	1.33	1,737,235	.7	.5	1.4	1	7,487	348	9,957
20	1.29	1,685,287	1.5	.7	1.6	2	9,238	396	12,216
20	1.22	1,594,500	2.2	5.6	5.8	3	74,059	1,402	91,298
20	1.20	1,563,857	3.0	6.2	6.4	4	81,550	1,550	100,287
20	1.19	1,557,611	3.7	6.4	6.9	5	84,141	1,669	103,370
20	1.17	1,533,170	4.5	8.6	10.4	6	112,777	2,525	136,874
20	1.14	1,497,367	5.3	8.6	10.4	7	112,876	2,529	136,987

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                                      PERCENT OF      PERCENT OF      PERCENT OF    CUMULATIVE     CUMULATIVE      CUMULATIVE     CUMULATIVE
       SCHEDULE        TOTAL          PHYSICIANS      RVS UNITS       SERVICES      NUMBER OF      NUMBER OF       NUMBER OF      COST OF
SPC     AMOUNT         COST         ABOVE SCHEDULE  ABOVE SCHEDULE  ABOVE SCHEDULE  PHYSICIANS     RVS UNITS       SERVICES       SERVICES

 20      1.12        1,473,501           6.0             8.7            10.7             8          114,405          2,606          138,790
 20      1.11        1,461,583           6.8             9.0            11.3             9          117,955          2,744          142,640
 20      1.10        1,449,701           7.5             9.1            11.4            10          119,581          2,770          144,429
 20      1.09        1,437,835           9.0            11.5            14.6            12          150,934          3,537          178,603
 20      1.08        1,426,282          10.6            15.7            19.8            14          205,323          4,796          237,344
 20      1.07        1,415,273          11.3            15.9            20.1            15          208,450          4,865          240,699
 20      1.06        1,404,296          12.1            16.6            20.7            16          216,870          5,019          249,615
 20      1.05        1,393,403          15.9            21.4            24.1            21          279,856          5,828          315,750
 20      1.04        1,383,139          18.1            22.0            24.6            24          288,451          5,956          324,699
 20      1.03        1,372,962          21.9            26.1            28.8            29          341,022          6,969          378,837
 20      1.02        1,363,310          23.4            27.5            30.4            31          359,426          7,356          397,609
 20      1.01        1,353,843          25.7            28.3            30.9            34          370,559          7,484          408,853
 20      1.00        1,344,486          31.8            33.9            37.9            42          443,707          9,175          482,001
 20       .99        1,335,861          36.3            39.0            43.4            48          510,020         10,503          547,651
 20       .98        1,327,900          42.4            45.0            48.2            56          588,540         11,652          624,601
 20       .97        1,320,723          47.7            51.2            55.3            63          669,884         13,367          703,534
 20       .96        1,314,360          50.7            56.6            60.2            67          740,365         14,563          771,166
 20       .95        1,308,702          53.7            59.8            64.6            71          782,290         15,629          810,995
 20       .94        1,303,463          59.8            65.2            69.2            79          852,140         16,735          876,654
 20       .93        1,298,922          65.1            70.4            75.0            86          920,452         18,129          940,194
 20       .92        1,295,065          69.6            78.4            81.4            92        1,024,838         19,690        1,036,219
 20       .91        1,292,251          74.2            81.2            83.9            98        1,060,932         20,293        1,069,065
 20       .90        1,289,799          75.7            82.0            85.0           100        1,071,111         20,539        1,078,226
 20       .89        1,287,448          77.2            82.7            85.5           102        1,080,506         20,679        1,086,587
 20       .88        1,285,191          78.7            82.9            85.7           104        1,083,087         20,729        1,088,859
 20       .87        1,282,960          81.0            84.0            85.7           107        1,097,314         20,967        1,101,236
 20       .86        1,280,871          85.6            87.9            90.4           113        1,149,124         21,859        1,145,793
 20       .85        1,279,301          86.3            88.0            90.6           114        1,150,313         21,890        1,146,833
 20       .84        1,277,742          89.3            93.9            95.0           118        1,227,052         22,966        1,211,264
 20       .83        1,276,950          90.1            93.9            95.1           119        1,227,701         22,980        1,211,933
 20       .82        1,276,165          91.6            94.1            95.2           121        1,229,987         23,008        1,213,677
 20       .80        1,274,641          93.1            95.4            96.1           123        1,246,396         23,238        1,226,835
 20       .79        1,274,043          93.9            97.4            97.8           124        1,273,272         23,633        1,248,037
 20       .78        1,273,714          95.4            98.2            98.6           126        1,283,980         23,837        1,256,389
 20       .76        1,273,270          97.7            99.9            99.8           129        1,305,318         24,128        1,272,606
 20       .75        1,273,261          99.2            99.9            99.9           131        1,306,088         24,157        1,273,183
 20       .60        1,273,246         100.0           100.0           100.0           132        1,306,192         24,161        1,273,246

                SUBTOTAL      44


     227   RECORDS PRINTED
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RVS BASED FEE SCHEDULE SIMULATION
AREA SPECIFIC

AV	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
1	1.14	2,059,602	.3	.0	.0	1	70	1	79
1	1.10	1,987,338	.7	.0	.0	2	160	4	178
1	1.05	1,897,013	1.1	.3	.0	3	6,394	58	6,724
1	1.03	1,861,007	1.4	.7	.2	4	13,707	192	14,256
1	1.02	1,843,078	2.2	.7	.2	6	13,807	197	14,358
1	1.01	1,825,149	2.6	.9	.3	7	17,098	252	17,632
1	1.00	1,807,253	3.7	1.6	1.1	10	30,125	887	30,739
1	.99	1,789,488	6.7	4.9	4.9	18	89,473	3,673	89,454
1	.98	1,772,316	10.4	8.2	7.9	28	149,556	5,853	148,345
1	.97	1,755,745	12.6	11.3	11.1	34	204,459	8,262	201,631
1	.96	1,739,723	15.2	13.7	14.2	41	249,245	10,555	244,596
1	.95	1,724,148	20.1	19.5	20.9	54	352,450	15,523	342,640
1	.94	1,709,606	23.8	22.3	24.1	64	404,533	17,887	391,598
1	.93	1,695,585	27.6	27.0	30.0	74	480,691	22,208	469,855
1	.92	1,682,405	33.9	32.6	35.8	91	590,465	26,525	563,497
1	.91	1,670,243	38.4	36.2	38.7	103	654,132	28,631	621,434
1	.90	1,658,718	43.6	42.2	45.7	117	763,522	33,806	719,885
1	.89	1,648,286	48.1	48.1	50.8	129	870,208	37,618	814,836
1	.88	1,638,922	50.7	50.1	52.7	136	906,728	38,958	846,974
1	.87	1,629,922	56.3	54.8	56.4	151	991,529	41,760	920,753
1	.86	1,621,771	59.3	58.0	58.6	159	1,049,578	43,339	970,673
1	.85	1,614,200	60.8	63.0	63.7	163	1,139,259	47,089	1,046,931
1	.84	1,607,526	63.4	66.7	67.4	170	1,206,310	49,864	1,103,224
1	.83	1,601,522	66.0	68.7	68.7	177	1,242,879	50,853	1,133,577
1	.82	1,595,884	69.0	70.5	70.2	185	1,274,397	51,960	1,159,421
1	.81	1,590,562	70.5	71.7	71.7	189	1,296,820	53,053	1,177,594
1	.80	1,585,463	73.8	76.2	75.0	198	1,376,881	55,467	1,241,533
1	.79	1,581,165	76.1	78.8	78.3	204	1,424,841	57,899	1,279,521
1	.78	1,577,347	77.9	80.3	79.1	209	1,451,521	58,533	1,300,331
1	.77	1,573,795	79.1	82.6	81.9	212	1,492,616	60,556	1,331,975
1	.76	1,570,655	82.0	85.3	85.2	220	1,541,675	63,002	1,369,259
1	.75	1,568,605	86.1	87.8	88.1	231	1,587,185	65,133	1,403,372
1	.74	1,565,810	88.4	89.1	89.3	237	1,609,846	66,078	1,420,151
1	.73	1,563,842	89.9	91.1	91.3	241	1,646,850	67,534	1,447,174
1	.72	1,562,244	91.7	93.6	92.9	246	1,692,177	68,741	1,479,839
1	.71	1,561,099	93.6	95.7	94.8	251	1,730,130	70,098	1,506,756
1	.70	1,560,333	94.4	96.4	95.7	253	1,743,129	70,755	1,515,855
1	.69	1,559,698	95.8	97.5	96.9	257	1,762,129	71,690	1,528,955
1	.67	1,558,807	96.6	97.9	97.5	259	1,770,311	72,080	1,534,447
1	.66	1,558,444	97.0	98.1	97.8	260	1,773,750	72,313	1,536,717
1	.65	1,558,114	97.3	98.2	97.9	261	1,775,079	72,394	1,537,581
1	.64	1,557,799	97.7	99.1	98.9	262	1,790,733	73,155	1,547,633
1	.63	1,557,639	98.8	99.5	99.3	265	1,798,701	73,452	1,552,619
1	.61	1,557,480	99.6	99.9	99.9	267	1,805,325	73,871	1,556,663
1	.60	1,557,466	100.0	100.0	100.0	268	1,806,669	73,923	1,557,456
	SUBTOTAL	45							
2	1.06	2,129,546	.4	.4	.1	1	8,420	154	8,925

RVS BASED FEE SCHEDULE SIMULATION
AREA SPECIFIC

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
2	1.05	2,109,540	1.6	1.8	.7	4	38,049	568	40,335
2	1.04	2,089,830	2.5	2.0	.8	6	41,154	692	43,264
2	1.02	2,050,473	3.3	2.3	1.0	8	46,392	795	48,537
2	1.01	2,030,847	5.5	3.2	1.1	13	65,871	921	68,281
2	1.00	2,011,416	7.2	5.0	2.6	17	100,663	2,061	103,373
2	.99	1,992,332	8.0	5.6	2.9	19	114,225	2,291	116,479
2	.98	1,973,385	10.5	10.2	6.3	25	205,688	4,924	206,133
2	.97	1,955,351	15.2	15.4	10.0	36	310,467	7,819	307,759
2	.96	1,938,366	17.7	17.9	11.2	42	360,073	8,776	355,330
2	.95	1,921,877	18.6	18.4	11.7	44	370,435	9,128	365,234
2	.94	1,905,491	26.2	25.3	18.8	62	510,056	14,675	496,478
2	.93	1,890,502	29.6	30.4	24.0	70	612,667	18,688	591,906
2	.92	1,876,538	36.8	39.6	34.2	87	796,466	26,620	761,031
2	.91	1,864,413	43.6	43.9	38.5	103	882,858	29,944	819,618
2	.90	1,853,151	50.8	49.9	44.6	120	1,004,020	34,684	948,654
2	.89	1,843,101	53.3	52.0	47.2	126	1,046,105	36,699	986,123
2	.88	1,833,472	55.9	56.4	53.6	132	1,134,494	41,737	1,063,932
2	.87	1,824,727	58.4	63.8	62.1	138	1,282,565	48,337	1,192,724
2	.86	1,817,463	62.2	69.4	68.1	147	1,395,523	52,961	1,289,858
2	.85	1,811,328	65.2	72.7	71.5	154	1,462,436	55,630	1,346,744
2	.84	1,805,862	67.3	74.3	72.9	159	1,493,778	56,742	1,373,071
2	.83	1,799,710	70.3	75.1	73.5	166	1,508,811	57,180	1,385,548
2	.82	1,795,708	75.0	79.8	79.1	177	1,604,445	61,522	1,463,958
2	.81	1,791,663	79.2	83.1	82.1	187	1,670,306	63,867	1,517,316
2	.80	1,788,276	80.9	84.3	83.4	191	1,695,055	64,859	1,537,115
2	.79	1,785,136	83.8	87.4	86.7	198	1,756,713	67,446	1,585,825
2	.78	1,782,613	86.0	89.1	88.8	203	1,791,978	69,044	1,613,331
2	.77	1,780,443	88.5	91.9	91.7	209	1,847,499	71,295	1,656,042
2	.76	1,778,828	88.9	92.0	91.8	210	1,849,513	71,411	1,657,613
2	.75	1,777,233	90.2	92.7	92.6	213	1,862,395	72,024	1,667,275
2	.74	1,775,767	90.6	92.8	92.8	214	1,864,396	72,146	1,668,755
2	.73	1,774,321	93.2	96.0	95.7	220	1,930,626	74,450	1,717,133
2	.71	1,772,753	94.0	96.8	95.9	222	1,945,730	74,616	1,727,827
2	.70	1,772,120	94.4	96.8	96.0	223	1,945,818	74,622	1,727,839
2	.69	1,771,488	94.9	97.2	96.3	224	1,953,762	74,892	1,733,370
2	.68	1,770,936	96.1	98.0	97.5	227	1,970,342	75,818	1,744,644
2	.67	1,770,549	96.6	98.0	97.5	228	1,970,378	75,821	1,744,669
2	.66	1,770,163	97.0	98.2	97.8	229	1,974,612	76,079	1,747,443
2	.65	1,769,819	97.8	98.5	98.2	231	1,980,086	76,376	1,751,021
2	.64	1,769,530	98.3	99.0	98.9	232	1,989,913	76,895	1,757,310
2	.62	1,769,148	98.7	99.7	99.5	233	2,003,487	77,398	1,765,726
2	.61	1,769,093	99.1	99.8	99.8	234	2,006,136	77,583	1,767,342
2	.60	1,769,064	100.0	100.0	100.0	236	2,009,006	77,731	1,769,054

SUBTOTAL 44

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
3	1.21	1,573,079	.4	.1	.2	1	2,122	136	2,557
3	1.05	1,365,408	1.8	.9	.6	4	11,915	305	12,853
3	1.03	1,339,645	2.3	2.5	1.2	5	33,038	599	34,636

RVS BASED FEE SCHEDULE SIMULATION
AREA SPECIFIC

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
3	1.02	1,326,975	4.1	2.5	1.3	9	33,593	630	35,173
3	1.01	1,314,310	5.5	3.3	2.1	12	43,199	1,007	44,875
3	1.00	1,301,742	10.6	5.4	4.2	23	70,706	1,991	72,382
3	.99	1,289,448	13.0	7.7	7.1	28	100,393	3,353	101,772
3	.98	1,277,451	15.3	8.7	7.5	33	113,504	3,534	114,621
3	.97	1,265,586	17.2	10.9	9.9	37	142,923	4,676	143,157
3	.96	1,254,014	19.0	13.7	13.0	41	178,384	6,135	177,200
3	.95	1,242,797	23.7	18.3	16.3	51	239,180	7,683	234,956
3	.94	1,232,189	26.5	19.7	17.1	57	256,198	8,060	250,953
3	.93	1,221,750	32.0	26.3	21.8	69	342,900	10,267	331,586
3	.92	1,212,178	35.3	30.4	26.9	76	396,011	12,669	380,448
3	.91	1,203,138	39.5	36.2	32.9	85	471,306	15,475	448,966
3	.90	1,194,850	43.2	39.9	36.9	93	518,905	17,341	491,835
3	.89	1,187,038	50.6	48.3	47.5	109	628,247	22,334	589,120
3	.88	1,180,320	54.4	51.8	51.4	117	674,479	24,176	629,804
3	.87	1,174,064	57.6	53.5	52.4	124	696,326	24,654	648,811
3	.86	1,168,027	61.3	57.6	57.2	132	750,033	26,880	694,999
3	.85	1,162,527	66.0	61.2	60.5	142	796,871	28,445	734,811
3	.84	1,157,495	70.6	67.4	67.0	152	876,547	31,486	801,739
3	.83	1,153,260	73.0	68.7	68.5	157	893,842	32,175	816,074
3	.82	1,149,157	74.8	71.5	71.1	161	929,764	33,410	845,550
3	.81	1,145,494	76.7	73.3	72.8	165	954,194	34,224	865,338
3	.80	1,142,036	78.6	75.3	74.0	169	979,925	34,768	885,923
3	.79	1,138,834	80.9	77.1	75.3	174	1,002,564	35,378	903,938
3	.78	1,135,859	82.7	83.9	82.1	178	1,091,514	38,562	973,189
3	.77	1,133,774	83.7	84.4	82.6	180	1,097,403	38,832	977,723
3	.76	1,131,747	86.5	85.7	83.9	186	1,115,226	39,447	991,269
3	.75	1,129,899	90.6	88.7	87.4	195	1,153,199	41,071	1,019,748
3	.74	1,128,430	92.0	89.9	88.7	198	1,169,775	41,703	1,032,015
3	.73	1,127,127	94.4	91.8	91.2	203	1,194,703	42,869	1,050,212
3	.72	1,126,073	95.3	92.4	91.7	205	1,202,271	43,071	1,055,651
3	.70	1,124,117	95.8	92.9	92.0	206	1,207,975	43,211	1,059,654
3	.69	1,123,197	96.7	97.1	97.2	208	1,262,385	45,682	1,097,197
3	.68	1,122,820	97.6	97.7	97.9	210	1,270,871	45,995	1,102,957
3	.66	1,122,236	98.1	98.7	98.8	211	1,283,718	46,409	1,111,446
3	.65	1,122,072	98.6	99.2	98.9	212	1,290,032	46,483	1,115,550
3	.64	1,121,972	99.0	99.2	99.0	213	1,290,310	46,496	1,115,728
3	.63	1,121,874	99.5	99.9	99.8	214	1,298,902	46,890	1,121,141
3	.62	1,121,863	100.0	100.0	100.0	215	1,300,066	46,964	1,121,853
		SUBTOTAL 42							
4	1.06	1,633,179	.5	.0	.1	1	583	118	617
4	1.02	1,571,573	1.1	.0	.1	2	603	119	638
4	1.01	1,556,171	1.7	.0	.2	3	1,133	138	1,173
4	1.00	1,540,775	2.9	.5	.3	5	8,841	201	8,881
4	.99	1,525,456	4.0	1.6	1.0	7	25,649	666	25,521
4	.98	1,510,305	5.2	2.1	1.1	9	33,433	766	33,149
4	.97	1,495,232	6.9	3.4	2.6	12	53,880	1,683	52,993

RVS BASED FEE SCHEDULE SIMULATION
AREA SPECIFIC

AG	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
4	.96	1,480,364	9.8	6.8	3.9	17	105,021	2,497	102,079
4	.95	1,466,007	12.2	8.9	5.3	21	137,999	3,413	133,407
4	.94	1,451,579	16.8	15.2	8.1	29	235,486	5,197	225,045
4	.93	1,438,927	22.6	24.6	14.3	39	380,282	9,139	359,706
4	.92	1,427,322	25.0	27.8	15.0	43	420,461	9,642	404,030
4	.91	1,416,200	31.9	38.0	28.5	55	585,895	18,261	547,295
4	.90	1,406,651	38.3	45.0	35.1	66	694,701	22,463	645,221
4	.89	1,398,191	45.9	51.7	44.3	79	797,246	28,326	736,486
4	.88	1,390,756	50.5	56.3	49.1	87	868,780	31,382	799,436
4	.87	1,384,036	53.4	62.5	57.7	92	963,776	36,894	882,082
4	.86	1,378,267	58.1	67.3	61.2	100	1,037,762	39,094	945,710
4	.85	1,373,237	64.5	73.0	67.4	111	1,124,895	43,061	1,019,773
4	.84	1,369,079	68.6	76.0	71.2	118	1,171,975	45,488	1,059,320
4	.83	1,365,391	72.6	77.6	73.9	125	1,196,677	47,250	1,079,823
4	.82	1,361,950	74.4	79.0	75.3	128	1,217,555	48,113	1,096,943
4	.81	1,358,719	76.1	80.7	77.3	131	1,243,538	49,419	1,117,939
4	.80	1,355,747	77.9	82.9	78.8	134	1,278,741	50,371	1,146,152
4	.79	1,353,127	79.6	85.0	80.0	137	1,310,572	51,143	1,171,298
4	.78	1,350,825	84.3	87.7	84.2	145	1,351,286	53,824	1,203,055
4	.77	1,348,931	85.4	89.3	86.0	147	1,376,508	54,985	1,222,476
4	.76	1,347,288	88.3	92.4	89.9	152	1,424,948	57,425	1,259,290
4	.75	1,346,131	90.1	94.5	92.5	155	1,456,222	59,087	1,282,746
4	.74	1,345,285	91.8	96.2	94.8	158	1,483,450	60,595	1,302,894
4	.73	1,344,713	92.4	96.4	95.0	159	1,485,473	60,724	1,304,371
4	.71	1,343,607	93.6	97.3	95.3	161	1,499,865	60,873	1,314,590
4	.70	1,343,159	94.7	97.5	95.7	163	1,503,130	61,144	1,316,875
4	.68	1,342,446	95.3	97.8	96.1	164	1,507,451	61,385	1,319,813
4	.67	1,342,114	95.9	98.1	96.5	165	1,511,831	61,686	1,322,748
4	.66	1,341,825	97.6	99.4	99.2	168	1,532,136	63,378	1,336,149
4	.65	1,341,739	98.2	99.8	99.7	169	1,537,867	63,704	1,339,874
4	.63	1,341,681	98.8	99.9	99.9	170	1,540,559	63,859	1,341,570
4	.60	1,341,676	99.4	99.9	99.9	171	1,540,663	63,863	1,341,633
4	.58	1,341,675	100.0	100.0	100.0	172	1,540,735	63,866	1,341,675

SUBTOTAL 40

5	1.09	1,156,931	.9	.0	.0	1	50	1	54
5	1.04	1,103,863	3.9	4.4	5.1	4	46,735	2,666	48,606
5	1.03	1,093,717	5.8	7.8	7.4	6	83,393	3,868	86,354
5	1.02	1,083,936	7.8	10.7	10.3	8	113,584	5,401	117,159
5	1.01	1,074,458	9.8	12.4	12.1	10	132,277	6,316	136,039
5	1.00	1,065,167	10.7	14.0	12.6	11	149,118	6,576	152,890
5	.99	1,056,044	15.6	23.0	22.6	16	244,632	11,765	247,439
5	.98	1,047,876	22.5	37.0	36.3	23	393,525	18,908	373,354
5	.97	1,041,197	28.4	41.3	41.0	29	439,122	21,366	417,583
5	.96	1,034,975	35.2	46.7	47.4	36	495,872	24,675	472,353
5	.95	1,029,319	44.1	50.8	50.9	45	539,294	26,495	533,314
5	.94	1,024,098	50.9	56.6	54.4	52	601,315	28,308	591,614
5	.93	1,019,497	55.8	58.3	55.1	57	619,552	29,195	608,574

AREA SPECIFIC

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
5	.92	1,015,079	58.8	60.4	57.7	60	641,737	30,005	628,984
5	.91	1,010,882	64.7	65.1	63.1	66	691,470	32,826	674,241
5	.90	1,007,183	65.6	65.6	63.9	67	696,926	33,260	679,152
5	.89	1,003,538	67.6	67.4	65.1	69	715,547	33,851	695,724
5	.88	1,000,079	71.5	69.6	67.7	73	738,777	35,209	716,167
5	.87	996,853	74.5	73.5	72.0	76	780,253	37,475	752,251
5	.86	994,042	75.4	75.1	72.6	77	797,186	37,764	766,913
5	.85	991,399	77.4	76.3	73.2	79	810,112	38,099	777,800
5	.84	988,886	83.3	80.9	80.1	85	859,404	41,653	819,236
5	.83	986,866	85.2	84.1	84.0	87	892,997	43,680	847,088
5	.82	985,182	87.2	87.8	88.6	89	932,936	46,115	879,838
5	.81	983,898	90.1	89.0	90.4	92	945,324	47,024	889,872
5	.80	982,737	91.1	89.0	90.4	93	945,374	47,025	889,912
5	.79	981,577	93.1	92.7	93.7	95	984,192	48,737	920,578
5	.78	980,804	94.1	93.7	94.8	96	994,742	49,293	928,837
5	.76	979,471	96.0	95.4	96.3	98	1,013,588	50,118	943,133
5	.75	978,993	97.0	96.3	97.4	99	1,022,912	50,650	950,123
5	.73	978,223	98.0	98.0	99.5	100	1,040,883	51,771	963,242
5	.71	977,813	99.0	98.1	99.6	101	1,041,839	51,806	963,921
5	.66	976,834	100.0	100.0	100.0	102	1,061,405	51,993	976,834

SUBTOTAL 33

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
6	1.20	870,672	.7	1.0	.4	1	7,491	148	8,989
6	1.16	841,949	1.5	1.9	1.5	2	14,234	494	16,811
6	1.13	820,609	2.2	2.9	2.7	3	21,635	874	25,174
6	1.12	813,570	4.5	5.0	4.9	6	36,443	1,578	41,759
6	1.07	779,114	6.8	6.5	5.4	9	47,546	1,726	53,639
6	1.05	765,554	9.1	8.6	7.1	12	62,406	2,284	69,242
6	1.04	758,922	9.9	9.0	8.0	13	65,838	2,556	72,811
6	1.03	752,325	12.9	11.5	9.9	17	83,524	3,149	91,028
6	1.02	745,904	16.7	14.7	12.0	22	107,151	3,843	115,127
6	1.01	739,720	19.0	15.9	13.5	25	115,773	4,315	123,836
6	1.00	733,623	22.9	18.8	16.9	30	137,078	5,386	145,141
6	.99	727,738	26.7	25.5	24.5	35	185,071	7,789	192,654
6	.98	722,333	29.7	27.6	26.4	39	200,849	8,420	208,115
6	.97	717,086	34.1	32.6	30.5	45	236,626	9,706	242,820
6	.96	712,196	36.6	39.0	37.7	48	283,041	12,002	287,378
6	.95	707,771	41.2	44.7	44.6	54	324,999	14,189	327,238
6	.94	703,766	45.0	48.1	47.8	59	349,201	15,211	349,988
6	.93	700,002	45.8	48.1	47.8	60	349,361	15,217	350,137
6	.92	696,240	48.0	50.3	49.7	63	365,664	15,818	365,136
6	.91	692,641	51.1	54.0	53.8	67	392,335	17,104	389,406
6	.90	689,369	53.4	57.3	57.0	70	415,784	18,144	410,513
6	.89	686,211	58.0	59.9	59.5	76	434,949	18,930	427,557
6	.88	683,305	64.1	65.8	65.7	84	478,118	20,891	455,556
6	.87	680,830	67.9	69.3	69.6	89	503,006	22,139	487,208
6	.86	678,605	70.9	70.8	71.4	93	513,921	22,710	496,595
6	.85	676,389	71.7	71.3	71.8	94	517,465	22,854	499,608

RVS BASED FEE SCHEDULE SIMULATION
AREA SPECIFIC

AP	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
6	.84	674,408	72.5	74.2	75.0	95	538,814	24,161	517,541
6	.83	672,540	75.5	75.6	77.1	99	548,891	24,533	525,905
6	.82	670,773	79.3	79.4	80.5	104	576,703	25,592	548,711
6	.81	669,285	81.6	82.0	82.9	107	595,341	26,375	563,837
6	.79	666,680	82.4	83.7	83.2	108	607,475	26,476	573,373
6	.78	665,500	83.9	85.4	85.5	110	619,708	27,210	582,335
6	.77	664,441	87.0	88.6	88.6	114	642,985	28,182	600,858
6	.76	663,615	89.3	90.1	89.6	117	654,123	28,497	609,323
6	.75	662,901	92.3	93.9	93.8	121	681,637	29,827	629,959
6	.74	662,462	93.1	94.4	94.3	122	684,982	29,985	632,434
6	.73	662,056	94.6	95.4	95.4	124	692,572	30,342	637,975
6	.71	661,396	96.1	95.9	96.1	126	696,380	30,558	640,678
6	.69	660,813	97.7	99.1	98.9	128	719,123	31,455	656,371
6	.68	660,748	99.2	99.2	99.1	130	720,442	31,531	657,258
6	.60	660,339	100.0	100.0	100.0	131	725,560	31,789	660,339
	SUBTOTAL	41							
7	1.33	2,146,552	.5	.4	.6	1	7,487	348	9,957
7	1.29	2,082,293	1.0	.5	.6	2	9,238	396	12,216
7	1.22	1,969,963	1.6	4.5	2.4	3	74,059	1,402	91,298
7	1.19	1,923,767	2.1	4.7	2.6	4	76,650	1,521	94,381
7	1.17	1,893,021	2.7	6.5	4.1	5	105,286	2,377	127,885
7	1.14	1,847,761	3.2	6.5	4.1	6	105,385	2,381	127,938
7	1.12	1,817,590	3.8	6.5	4.1	7	106,343	2,387	129,071
7	1.11	1,802,514	4.3	6.8	4.4	8	109,893	2,525	133,011
7	1.09	1,772,432	4.9	6.8	4.4	9	109,943	2,526	133,966
7	1.08	1,757,392	6.0	9.5	6.2	11	153,761	3,561	180,339
7	1.07	1,742,790	6.5	9.7	6.3	12	156,888	3,630	183,735
7	1.06	1,728,220	8.2	9.7	6.4	15	157,757	3,677	184,656
7	1.05	1,713,658	8.7	10.9	6.7	16	176,759	3,860	204,638
7	1.04	1,699,286	10.9	12.1	7.6	20	196,438	4,398	225,075
7	1.03	1,685,111	12.6	15.1	9.3	23	244,805	5,384	274,893
7	1.02	1,671,419	15.3	16.8	10.0	28	271,565	5,769	302,188
7	1.01	1,657,996	17.0	17.8	10.7	31	288,697	6,139	319,491
7	1.00	1,644,743	23.0	24.2	16.3	43	391,625	9,373	422,419
7	.99	1,632,520	25.2	24.6	16.9	46	397,625	9,697	428,359
7	.98	1,620,357	30.7	29.6	22.7	56	478,050	13,031	507,176
7	.97	1,608,998	35.1	33.2	25.7	64	536,160	14,790	563,542
7	.96	1,598,220	37.3	34.9	28.1	68	563,520	16,126	589,838
7	.95	1,587,715	42.3	44.5	38.7	77	718,478	22,226	737,018
7	.94	1,578,761	46.1	48.2	42.2	84	779,113	24,233	794,015
7	.93	1,570,412	47.8	51.2	46.4	87	827,302	26,643	838,831
7	.92	1,562,546	51.6	52.4	47.6	94	846,151	27,319	856,172
7	.91	1,554,868	54.3	56.6	49.6	99	914,428	28,489	918,334
7	.90	1,547,873	57.6	60.7	54.1	105	979,813	31,063	977,153
7	.89	1,541,531	58.7	62.6	56.1	107	1,011,437	32,213	1,005,296
7	.88	1,535,506	61.5	63.7	57.5	112	1,028,731	33,003	1,020,514
7	.87	1,529,654	64.2	65.8	60.6	117	1,063,360	34,795	1,050,642

AREA SPECIFIC

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
7	.86	1,524,148	65.3	66.3	61.1	119	1,071,045	35,072	1,057,251
7	.85	1,518,719	68.6	70.7	66.4	125	1,142,280	38,108	1,117,930
7	.84	1,514,602	70.3	73.1	68.8	128	1,180,717	39,505	1,150,088
7	.83	1,509,670	74.7	75.5	71.9	136	1,219,377	41,269	1,182,175
7	.82	1,505,724	77.4	79.0	76.2	141	1,276,386	43,730	1,228,923
7	.81	1,502,349	79.6	82.0	78.9	145	1,323,604	45,280	1,267,169
7	.80	1,499,445	84.6	86.4	84.1	154	1,395,628	48,245	1,324,789
7	.79	1,497,262	86.8	88.0	86.3	158	1,420,948	49,502	1,344,791
7	.78	1,495,332	89.0	92.4	91.4	162	1,491,615	52,424	1,399,912
7	.77	1,494,109	90.1	93.8	93.0	164	1,514,790	53,395	1,417,756
7	.76	1,493,117	92.3	95.1	94.2	168	1,535,766	54,066	1,433,699
7	.75	1,492,335	93.4	95.5	94.7	170	1,542,791	54,335	1,438,967
7	.74	1,491,624	93.9	95.7	94.9	171	1,545,703	54,434	1,441,122
7	.73	1,490,941	94.5	95.7	94.9	172	1,545,806	54,448	1,441,197
7	.72	1,490,260	95.6	96.5	95.5	174	1,557,854	54,832	1,449,871
7	.71	1,489,699	96.7	96.5	95.6	176	1,558,813	54,851	1,450,552
7	.70	1,489,148	97.8	97.7	97.2	178	1,576,967	55,788	1,463,263
7	.69	1,488,778	98.3	99.4	99.4	179	1,605,330	57,063	1,482,831
7	.67	1,488,605	98.9	99.9	99.9	180	1,612,850	57,322	1,487,859
7	.64	1,488,572	99.4	99.9	99.9	181	1,613,199	57,332	1,488,032
7	.62	1,488,557	100.0	100.0	100.0	182	1,613,949	57,356	1,488,557
	SUBTOTAL	52							
8	1.13	982,077	.7	.9	.3	1	8,220	136	9,288
8	1.11	964,859	1.5	1.1	.4	2	9,822	158	11,066
8	1.10	956,267	3.1	1.4	.6	4	12,989	226	14,550
8	1.09	947,706	4.7	5.9	3.0	6	51,551	1,070	56,583
8	1.08	939,530	5.5	6.7	3.9	7	58,802	1,419	64,414
8	1.06	923,324	7.8	7.2	4.0	10	62,942	1,457	68,832
8	1.04	907,201	9.4	7.5	4.2	12	65,496	1,509	71,458
8	1.03	899,165	11.8	8.8	5.4	15	76,885	1,935	83,189
8	1.02	891,243	15.7	10.8	7.6	20	94,203	2,714	100,853
8	1.01	883,494	19.6	16.9	14.5	25	147,738	5,162	154,924
8	1.00	876,261	29.9	30.5	28.3	38	265,710	10,067	272,896
8	.99	870,247	36.2	43.5	43.7	46	378,779	15,559	384,834
8	.98	865,344	37.7	46.9	47.0	48	408,455	16,743	413,916
8	.97	860,737	40.9	48.2	47.9	52	419,644	17,051	424,770
8	.96	856,243	41.7	48.4	48.2	53	421,291	17,146	426,351
8	.95	851,765	44.0	48.9	48.7	56	425,686	17,349	430,526
8	.94	847,331	46.4	50.4	50.2	59	438,441	17,878	442,516
8	.93	843,024	48.0	51.5	51.5	61	448,056	18,339	451,458
8	.92	838,814	55.1	61.0	61.4	70	530,424	21,859	527,236
8	.91	835,427	58.2	62.0	62.5	74	539,665	22,254	535,646
8	.90	832,133	65.3	71.1	72.3	83	618,699	25,721	606,776
8	.89	829,629	69.2	73.3	73.5	88	637,459	26,152	623,473
8	.88	827,312	71.6	74.6	74.0	91	649,114	26,345	633,729
8	.87	825,113	77.1	78.3	76.4	98	681,210	27,200	651,653
8	.86	823,234	82.6	83.0	81.9	105	721,609	29,160	696,336

AREA SPECIFIC

A9	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
8	.85	821,759	86.6	89.4	90.3	110	777,367	32,138	743,790
8	.84	820,842	88.1	89.8	90.9	112	781,313	32,353	747,105
8	.83	819,964	89.7	92.4	93.5	114	803,379	33,279	765,419
8	.82	819,307	91.3	93.2	94.2	116	810,144	33,544	770,957
8	.81	818,717	92.9	94.5	95.5	118	821,362	33,976	780,053
8	.79	817,762	93.7	94.6	95.6	119	822,396	34,031	780,879
8	.77	816,828	94.4	95.8	97.1	120	833,413	34,565	789,353
8	.76	816,472	96.0	97.5	97.7	122	847,724	34,774	800,233
8	.75	816,258	97.6	97.9	97.9	124	850,871	34,855	802,530
8	.73	815,893	98.4	98.5	98.7	125	856,738	35,128	806,873
8	.71	815,646	100.0	100.0	100.0	127	869,095	35,572	815,646
	SUBTOTAL	36							
9	1.08	1,828,329	.4	.8	.6	1	13,570	365	14,655
9	1.05	1,777,950	.8	1.4	.8	2	24,072	524	25,682
9	1.04	1,761,261	1.3	1.6	1.0	3	28,527	619	30,315
9	1.03	1,744,618	2.6	2.1	1.3	6	36,568	831	38,598
9	1.02	1,728,054	5.7	4.7	4.2	13	79,580	2,548	82,470
9	1.01	1,711,921	7.5	5.4	4.9	17	91,506	3,010	94,515
9	1.00	1,695,907	10.2	7.3	7.7	23	123,949	4,659	126,958
9	.99	1,680,218	14.2	10.0	9.9	32	169,928	6,024	172,477
9	.98	1,664,988	17.7	12.7	13.2	40	215,343	7,973	216,994
9	.97	1,650,212	21.3	15.1	15.5	48	256,711	9,372	257,111
9	.96	1,635,851	24.4	17.8	17.7	55	301,669	10,731	300,271
9	.95	1,621,938	27.1	20.3	20.6	61	344,253	12,436	340,725
9	.94	1,608,452	28.0	20.7	21.0	63	351,959	12,718	347,969
9	.93	1,595,042	31.5	26.5	26.7	71	448,974	16,108	438,133
9	.92	1,582,603	35.1	32.9	30.6	79	557,175	18,475	537,738
9	.91	1,571,246	39.1	35.9	32.9	88	608,406	19,894	584,359
9	.90	1,560,401	44.4	38.8	35.3	100	657,309	21,326	628,371
9	.89	1,550,045	46.6	40.4	36.7	105	685,185	22,174	653,181
9	.88	1,539,968	49.3	43.6	40.6	111	739,546	24,544	701,018
9	.87	1,530,434	53.7	49.1	48.2	121	832,173	29,078	781,604
9	.86	1,521,827	60.8	60.5	61.5	137	1,024,571	37,123	947,056
9	.85	1,515,144	64.8	64.1	65.2	146	1,085,905	39,333	999,200
9	.84	1,509,074	66.2	68.5	67.5	149	1,159,940	40,721	1,061,339
9	.83	1,503,744	70.6	73.5	71.9	159	1,244,635	43,406	1,131,686
9	.82	1,499,262	72.8	74.5	72.9	164	1,262,580	43,985	1,146,401
9	.81	1,494,959	78.2	82.5	82.2	176	1,398,250	49,627	1,256,234
9	.80	1,492,012	80.4	84.5	83.8	181	1,431,357	50,577	1,282,779
9	.79	1,489,397	84.8	88.4	86.6	191	1,497,526	52,278	1,335,053
9	.78	1,487,443	87.5	92.3	91.5	197	1,563,792	55,211	1,386,740
9	.77	1,486,152	88.4	93.0	91.9	199	1,575,460	55,480	1,395,725
9	.76	1,484,978	89.7	93.6	92.8	202	1,585,999	56,029	1,403,734
9	.75	1,483,969	90.6	94.2	93.6	204	1,595,255	56,485	1,410,676
9	.74	1,482,932	91.5	95.0	94.7	206	1,609,343	57,172	1,421,131
9	.73	1,482,097	95.3	96.0	95.3	210	1,626,176	57,516	1,433,393
9	.72	1,481,429	95.7	96.5	95.9	211	1,635,674	57,858	1,440,228

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                                          RVS BASED FEE SCHEDULE SIMULATION
                                                    AREA SPECIFIC

                                      PERCENT OF     PERCENT OF       PERCENT OF     CUMULATIVE   CUMULATIVE     CUMULATIVE     CUMULATIVE
      SCHEDULE       TOTAL            PHYSICIANS     RVS UNITS        SERVICES       NUMBER OF    NUMBER OF      NUMBER OF      COST OF
A9     AMOUNT        COST          ABOVE SCHEDULE ABOVE SCHEDULE  ABOVE SCHEDULE  PHYSICIANS   RVS UNITS      SERVICES       SERVICES

 9       .71       1,480,857           94.6           97.9             97.5           213       1,657,871         58,821      1,455,988
 9       .70       1,480,507           95.5           98.2             97.9           215       1,662,658         59,105      1,459,339
 9       .68       1,479,902           96.4           98.3             98.1           217       1,665,348         59,227      1,461,158
 9       .66       1,479,351           98.2           99.1             98.6           221       1,677,920         59,519      1,469,456
 9       .65       1,479,201           98.6           99.3             98.9           222       1,681,340         59,670      1,471,639
 9       .64       1,479,086           99.1           99.3             98.9           223       1,681,669         59,687      1,471,399
 9       .63       1,478,973           99.5           99.3             98.9           224       1,681,701         59,689      1,471,919
 9       .60       1,478,638          100.0          100.0            100.0           225       1,692,898         60,318      1,478,638

            SUBTOTAL        43

      376    RECORDS PRINTED
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RVS BASIC FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

AR	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
1	01	1.10	782,985	.7	.0	.0	1	90	3	99
1	01	1.02	726,048	1.5	.0	.0	2	170	7	183
1	01	1.00	711,815	2.3	1.4	1.3	3	10,006	528	10,015
1	01	.99	704,797	4.6	6.0	6.1	6	43,267	2,435	42,944
1	01	.98	698,112	8.5	9.9	10.1	11	71,052	4,008	70,174
1	01	.97	691,704	11.7	12.6	13.1	15	90,145	5,189	88,694
1	01	.96	685,488	14.8	16.2	16.8	19	115,617	6,651	113,147
1	01	.95	679,526	20.3	24.5	25.8	26	174,608	10,195	169,189
1	01	.94	674,154	22.6	26.3	27.6	29	187,713	10,926	181,507
1	01	.93	668,913	28.9	35.1	37.3	37	249,896	14,740	239,337
1	01	.92	664,294	35.1	39.9	41.8	45	284,674	16,495	271,333
1	01	.91	660,022	39.8	42.6	44.9	51	303,734	17,730	288,678
1	01	.90	655,942	46.8	52.9	55.6	60	377,079	21,954	354,683
1	01	.89	652,594	51.5	59.4	61.9	66	423,313	24,427	395,837
1	01	.88	649,710	56.2	62.8	65.0	72	447,149	25,651	416,812
1	01	.87	647,063	60.1	65.3	67.7	77	465,456	26,732	432,739
1	01	.86	644,599	61.7	66.0	68.6	79	470,412	27,089	437,002
1	01	.85	642,186	63.2	67.1	69.9	81	478,051	27,596	443,495
1	01	.84	639,848	64.8	70.4	73.5	83	501,474	29,016	463,170
1	01	.82	635,641	67.1	72.8	75.1	86	518,709	29,661	477,303
1	01	.81	633,710	68.7	73.2	75.6	88	521,635	29,856	479,673
1	01	.80	631,809	71.8	75.7	78.2	92	539,289	30,881	493,796
1	01	.79	630,084	74.2	78.3	80.4	95	557,741	31,747	508,373
1	01	.78	628,543	77.3	79.7	81.7	99	567,947	32,251	516,334
1	01	.77	627,104	78.1	81.8	83.6	100	582,637	33,013	527,645
1	01	.76	625,813	78.9	82.4	84.1	101	586,541	33,199	539,612
1	01	.75	624,560	83.5	85.3	87.0	107	607,686	34,361	546,471
1	01	.74	623,519	86.7	86.6	88.4	111	617,046	34,909	553,397
1	01	.73	622,571	89.0	91.0	91.5	114	647,802	36,127	575,907
1	01	.72	621,932	90.6	91.8	92.3	116	653,777	36,428	580,152
1	01	.71	621,352	91.4	94.3	94.4	117	671,486	37,256	592,725
1	01	.70	620,949	92.1	95.1	95.2	118	677,243	37,579	596,755
1	01	.69	620,603	94.5	96.9	96.9	121	689,793	38,247	605,415
1	01	.67	620,163	96.0	98.0	97.9	123	697,975	38,637	610,897
1	01	.66	620,024	96.8	98.5	98.5	124	701,414	38,870	613,165
1	01	.63	619,713	98.4	98.8	98.8	126	703,973	38,996	614,779
1	01	.61	619,556	99.2	99.8	99.3	127	710,461	39,407	618,735
1	01	.50	619,543	100.0	100.0	100.0	128	711,805	39,459	619,543
		SUBTOTAL	38							
1	02	1.05	281,427	2.0	2.3	1.0	1	6,234	54	6,545
1	02	1.03	276,583	4.0	5.0	3.6	2	13,547	188	14,078
1	02	1.02	274,035	6.1	5.0	3.6	3	13,567	189	14,098
1	02	1.01	271,486	8.1	6.2	4.6	4	16,858	244	17,422
1	02	.99	266,455	14.2	11.8	9.7	7	31,862	507	32,276
1	02	.98	264,090	16.3	14.5	11.2	8	38,934	583	39,206
1	02	.96	259,501	18.3	17.0	19.9	9	45,820	1,038	45,817
1	02	.95	257,275	26.5	23.0	22.2	13	61,957	1,160	61,147

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
1	02	.94	255,210	30.6	26.2	29.5	15	70,354	1,537	69,043
1	02	.92	251,249	36.7	31.1	33.3	18	83,579	1,734	81,207
1	02	.91	249,401	44.8	43.3	39.8	22	116,370	2,076	111,047
1	02	.90	247,880	48.9	47.9	42.4	24	128,819	2,210	122,251
1	02	.89	246,485	53.0	55.2	48.2	26	148,321	2,511	139,508
1	02	.88	245,284	55.1	59.9	50.4	27	161,005	2,627	150,770
1	02	.87	244,210	63.2	66.8	55.9	31	179,325	2,912	166,708
1	02	.84	241,537	65.3	69.3	57.5	32	186,248	2,993	172,524
1	02	.83	240,716	71.4	76.7	61.8	35	205,932	3,220	188,851
1	02	.82	240,091	79.5	81.2	70.2	39	218,158	3,656	198,887
1	02	.80	239,086	81.6	81.6	72.0	40	219,258	3,749	199,767
1	02	.79	238,594	83.6	83.7	77.7	41	224,870	4,047	204,200
1	02	.78	238,159	85.7	89.9	80.2	42	241,344	4,177	217,053
1	02	.75	237,347	87.7	90.4	81.4	43	242,764	4,240	218,115
1	02	.74	237,091	89.7	92.5	87.5	44	248,461	4,555	222,331
1	02	.73	236,891	91.8	94.8	92.0	45	254,629	4,793	226,833
1	02	.71	236,616	97.9	99.9	99.8	48	268,271	5,197	236,519
1	02	.61	236,602	100.0	100.0	100.0	49	268,407	5,205	236,602
		SUBTOTAL	26							
1	11	1.14	593,290	1.8	.0	.0	1	70	1	79
1	11	1.00	520,439	3.7	.0	.0	2	120	2	129
1	11	.99	515,236	7.4	2.1	2.6	4	11,203	618	11,101
1	11	.98	510,144	9.2	3.4	4.1	5	17,925	988	17,689
1	11	.97	505,119	11.1	6.1	7.1	6	32,066	1,686	31,406
1	11	.96	500,235	12.9	6.8	7.9	7	35,864	1,894	35,052
1	11	.95	495,390	14.8	10.4	11.6	8	54,503	2,760	52,759
1	11	.94	490,730	20.3	14.9	16.1	11	77,675	3,837	74,541
1	11	.93	486,303	22.2	16.9	17.7	12	87,972	4,222	84,117
1	11	.92	481,978	33.3	27.2	27.7	18	141,743	6,587	133,586
1	11	.91	478,191	35.1	29.5	29.9	19	153,547	7,115	144,323
1	11	.90	474,522	38.8	32.6	32.7	21	169,939	7,777	159,081
1	11	.89	471,018	42.5	36.0	35.5	23	187,393	8,435	174,615
1	11	.87	464,357	50.0	40.7	40.1	27	212,156	9,530	196,158
1	11	.86	461,274	53.7	43.3	42.6	29	225,636	10,117	207,751
1	11	.85	458,326	57.4	59.1	56.3	31	307,678	13,360	277,487
1	11	.84	456,199	59.2	63.2	60.5	32	328,917	14,368	295,328
1	11	.83	454,264	62.9	66.2	63.6	34	344,956	15,104	309,640
1	11	.81	450,774	66.6	70.0	67.4	36	364,453	16,002	324,433
1	11	.80	449,214	70.3	71.1	68.8	38	370,496	16,337	329,267
1	11	.79	447,715	74.0	75.7	74.1	40	394,392	17,605	348,145
1	11	.77	445,194	77.7	80.8	79.5	42	420,797	18,866	368,477
1	11	.76	444,198	88.8	89.2	88.9	48	464,624	21,104	401,785
1	11	.75	443,640	92.5	92.4	92.1	50	481,357	21,865	414,335
1	11	.72	442,468	94.4	94.3	94.2	51	491,084	22,367	421,333
1	11	.70	441,881	96.2	95.7	95.6	52	498,326	22,701	426,408
1	11	.69	441,660	98.1	96.9	96.7	53	504,776	22,968	430,859
1	11	.64	440,877	100.0	100.0	100.0	54	520,430	23,729	440,877
		SUBTOTAL	23							

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
1	18	.90	171,362	5.0	3.7	4.8	1	7,204	155	6,403
1	18	.89	169,530	15.0	16.1	16.6	3	30,700	535	27,395
1	18	.87	166,336	25.0	28.4	27.1	5	54,111	876	47,762
1	18	.86	164,973	35.0	36.7	32.9	7	70,032	1,062	61,454
1	18	.84	162,566	45.0	41.0	38.4	9	78,081	1,240	68,215
1	18	.83	161,443	50.0	41.1	38.8	10	78,278	1,252	68,373
1	18	.80	158,079	60.0	70.1	68.7	12	133,542	2,213	112,593
1	18	.75	155,236	70.0	73.3	73.2	14	139,754	2,358	117,249
1	18	.74	154,729	75.0	77.3	75.7	15	147,358	2,440	122,875
1	18	.72	153,868	85.0	92.9	88.2	17	177,063	2,844	144,264
1	18	.71	153,735	90.0	96.4	92.1	18	183,665	2,969	148,951
1	18	.65	153,331	95.0	97.1	94.6	19	184,994	3,050	149,815
1	18	.63	153,223	100.0	100.0	100.0	20	190,403	3,221	153,223
		SUBTOTAL	13							
1	20	1.00	115,624	5.8	2.7	4.8	1	3,141	113	3,141
1	20	.98	113,374	23.5	18.7	11.8	4	21,645	274	21,274
1	20	.97	112,434	29.4	37.4	34.8	5	43,314	804	42,293
1	20	.96	111,711	35.2	44.9	42.0	6	51,944	972	50,578
1	20	.95	111,074	41.1	53.0	60.9	7	61,382	1,408	59,544
1	20	.94	110,532	52.9	59.4	68.7	9	68,791	1,587	66,509
1	20	.93	110,063	58.8	69.5	74.0	10	80,469	1,709	77,369
1	20	.91	109,360	64.7	69.6	74.0	11	80,481	1,710	77,380
1	20	.86	107,603	76.4	90.0	93.5	13	104,173	2,159	97,755
1	20	.84	107,374	82.3	96.5	97.3	14	111,590	2,247	103,995
1	20	.83	107,334	88.2	97.0	97.9	15	112,239	2,261	104,524
1	20	.82	107,300	94.1	98.8	99.0	16	114,296	2,287	106,211
1	20	.76	107,220	100.0	100.0	100.0	17	115,624	2,309	107,220
		SUBTOTAL	13							
2	01	1.02	419,765	1.2	.0	.0	1	20	1	20
2	01	1.00	411,535	2.4	1.1	.9	2	4,682	203	4,692
2	01	.98	403,398	3.7	1.3	1.1	3	5,602	240	5,584
2	01	.97	399,339	4.9	1.4	1.1	4	5,812	243	5,787
2	01	.96	395,281	6.1	2.7	2.4	5	11,213	524	10,972
2	01	.95	391,278	7.4	4.0	3.7	6	16,781	811	16,262
2	01	.94	387,331	14.8	17.9	17.5	12	73,863	3,766	69,919
2	01	.93	383,954	19.7	22.2	21.5	16	91,488	4,625	86,313
2	01	.92	380,753	29.6	36.5	34.8	24	150,503	7,454	140,604
2	01	.91	378,143	38.2	45.6	44.8	31	188,001	9,612	174,727
2	01	.90	375,908	45.6	50.5	50.7	37	208,162	10,871	192,872
2	01	.89	373,874	48.1	51.5	52.0	39	212,092	11,145	196,373
2	01	.88	371,880	50.6	54.3	55.4	41	223,693	11,871	206,579
2	01	.87	370,001	51.8	55.1	56.3	42	226,811	12,060	209,291
2	01	.86	368,154	58.0	62.5	63.5	47	257,342	13,618	235,548
2	01	.85	366,612	60.4	65.3	65.8	49	264,883	14,099	245,358

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

AY	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
2	01	.84	365,185	62.9	67.2	67.6	51	276,942	14,481	252,127
2	01	.83	363,839	67.9	68.0	68.2	55	280,164	14,621	254,802
2	01	.82	362,526	70.3	70.2	71.0	57	288,907	15,219	261,971
2	01	.81	361,299	72.8	71.3	72.5	59	293,455	15,529	265,655
2	01	.79	358,938	75.3	72.9	73.9	61	300,152	15,835	270,945
2	01	.78	357,824	77.7	74.9	75.5	63	308,308	16,186	277,307
2	01	.77	356,792	81.4	84.5	83.1	66	348,020	17,800	307,885
2	01	.76	356,157	82.7	85.0	83.6	67	350,034	17,916	309,415
2	01	.75	355,542	83.9	87.5	85.9	68	360,109	18,401	315,972
2	01	.74	355,027	85.1	87.9	86.4	69	362,110	18,523	318,453
2	01	.73	354,533	88.8	93.2	92.7	72	383,959	19,859	334,402
2	01	.70	353,706	90.1	93.3	92.7	73	384,046	19,865	334,464
2	01	.68	353,156	93.8	97.3	97.0	76	400,626	20,791	345,738
2	01	.67	353,047	95.0	97.3	97.0	77	400,662	20,794	345,762
2	01	.65	352,829	97.5	98.6	98.4	79	406,136	21,091	349,323
2	01	.61	352,614	98.7	99.3	99.3	80	408,785	21,276	350,936
2	01	.60	352,586	100.0	100.0	100.0	81	411,535	21,418	352,585
		SUBTOTAL	33							
2	02	1.04	241,257	2.2	.6	1.1	1	1,582	49	1,645
2	02	1.02	236,649	4.5	2.9	3.5	2	6,800	151	6,967
2	02	1.01	234,397	11.3	7.8	5.4	5	18,237	222	18,519
2	02	1.00	232,260	13.6	9.5	6.7	6	22,156	274	22,438
2	02	.97	225,965	25.0	24.3	18.7	11	56,469	765	55,721
2	02	.96	224,210	34.0	31.5	23.8	15	73,210	975	71,792
2	02	.95	222,622	36.3	33.6	25.4	16	78,004	1,040	76,347
2	02	.94	221,082	43.1	37.7	30.8	19	87,499	1,261	85,272
2	02	.93	219,638	45.4	40.8	32.2	20	94,668	1,317	91,939
2	02	.92	218,264	52.2	49.3	41.5	23	114,536	1,698	110,219
2	02	.91	217,090	59.0	57.1	49.0	26	132,560	2,006	126,623
2	02	.90	216,096	70.4	73.3	67.8	31	170,106	2,772	160,411
2	02	.86	213,621	72.7	78.1	70.3	32	181,299	2,875	170,037
2	02	.85	213,114	75.0	78.2	70.5	33	181,495	2,884	170,204
2	02	.83	212,105	77.2	78.9	71.3	34	183,074	2,917	171,514
2	02	.82	211,615	81.8	82.5	74.0	36	191,536	3,026	178,453
2	02	.81	211,211	90.9	90.5	87.7	40	210,129	3,587	193,513
2	02	.80	210,993	93.1	91.6	88.7	41	212,557	3,628	195,456
2	02	.79	210,798	95.4	96.4	92.5	42	223,658	3,782	204,225
2	02	.71	210,133	97.7	98.1	93.6	43	227,744	3,828	207,127
2	02	.66	209,921	100.0	100.0	100.0	44	231,978	4,086	209,921
		SUBTOTAL	21							
2	11	1.05	1,026,800	1.3	.0	.0	1	274	3	287
2	11	1.00	977,926	2.7	.8	.8	2	7,896	381	7,909
2	11	.96	958,526	6.9	4.8	4.8	5	47,062	2,225	46,292
2	11	.97	949,217	11.1	8.8	9.1	8	86,548	4,152	84,593

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
2	11	.94	922,476	19.4	13.1	13.2	14	128,596	6,008	124,113
2	11	.93	913,983	22.2	19.9	19.5	16	195,564	8,887	186,399
2	11	.92	906,160	27.7	27.3	28.4	20	267,432	12,947	252,517
2	11	.91	899,055	31.9	28.9	29.9	23	283,191	13,623	266,858
2	11	.90	892,108	40.2	35.4	35.9	29	346,646	16,338	323,967
2	11	.89	885,795	45.8	39.3	39.7	33	384,801	18,079	357,925
2	11	.88	879,864	51.3	47.2	49.2	37	461,589	22,391	425,493
2	11	.87	874,701	58.3	62.0	63.3	42	606,542	28,802	551,698
2	11	.86	870,987	61.1	67.9	69.6	44	664,642	31,670	601,574
2	11	.85	867,854	66.6	73.6	74.4	48	719,818	33,849	643,474
2	11	.84	865,273	68.0	74.7	75.5	49	731,463	34,346	659,255
2	11	.83	862,809	69.4	75.3	75.9	50	736,439	34,536	662,385
2	11	.82	860,394	75.0	82.2	83.4	54	803,870	37,933	717,679
2	11	.81	858,654	77.7	84.5	85.8	56	826,915	38,998	736,345
2	11	.80	857,144	80.5	86.8	87.8	58	849,106	39,943	754,099
2	11	.79	855,856	86.1	91.3	92.5	62	892,966	42,070	784,747
2	11	.78	855,006	90.2	94.0	95.3	65	920,075	43,317	809,892
2	11	.77	854,428	93.0	95.6	96.6	67	935,693	43,948	821,918
2	11	.73	852,739	95.8	97.7	98.2	69	956,275	44,671	836,943
2	11	.69	851,873	97.2	98.5	98.8	70	964,219	44,941	842,425
2	11	.62	850,915	98.6	99.9	99.9	71	977,793	45,444	859,843
2	11	.60	850,912	100.0	100.0	100.0	72	977,913	45,450	850,912
		SUBTOTAL	26							
2	18	.94	148,560	10.5	16.9	13.7	2	26,769	375	25,152
2	18	.93	147,247	15.7	23.8	21.7	3	37,618	594	35,252
2	18	.92	146,043	21.0	27.5	25.0	4	43,525	683	40,686
2	18	.91	144,893	31.5	35.4	30.6	6	56,074	836	52,106
2	18	.86	139,799	36.8	43.7	34.1	7	69,208	931	63,431
2	18	.84	138,023	42.1	47.5	36.9	8	75,170	1,008	68,409
2	18	.83	137,194	47.3	50.8	39.7	9	80,426	1,083	72,772
2	18	.82	136,418	57.9	57.7	48.3	11	91,195	1,319	81,602
2	18	.81	135,749	68.4	70.1	63.3	13	110,870	1,728	97,539
2	18	.80	135,277	73.6	70.2	63.6	14	111,000	1,734	97,643
2	18	.77	133,866	78.9	70.3	63.8	15	111,191	1,740	97,793
2	18	.75	132,929	84.2	71.7	67.5	16	113,398	1,842	99,445
2	18	.73	132,036	89.4	86.9	76.5	17	137,198	2,087	116,819
2	18	.71	131,619	94.7	93.7	80.9	18	148,216	2,207	124,642
2	18	.64	130,931	100.0	100.0	100.0	19	158,043	2,726	130,931
		SUBTOTAL	15							
2	20	1.06	243,309	5.0	3.6	3.8	1	8,420	154	8,925
2	20	1.05	241,038	15.0	16.4	13.9	3	37,775	565	39,747
2	20	1.04	239,183	20.0	17.1	15.7	4	39,298	640	41,331
2	20	1.01	233,473	30.0	20.6	17.1	6	47,340	695	49,454
2	20	1.00	231,651	35.0	28.7	29.6	7	65,929	1,203	68,043

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                                       PERCENT OF      PERCENT OF      PERCENT OF    CUMULATIVE   CUMULATIVE    CUMULATIVE    CUMULATIVE
          SCHEDULE      TOTAL          PHYSICIANS      RVS UNITS       SERVICES      NUMBER OF    NUMBER OF     NUMBER OF     COST OF
AD SPC    AMOUNT        COST          ABOVE SCHEDULE ABOVE SCHEDULE ABOVE SCHEDULE PHYSICIANS    RVS UNITS     SERVICES      SERVICES

 2  20      .99        230,015          45.0            34.6            35.3            9          79,491        1,433        81,469
 2  20      .98        228,514          55.0            57.0            53.9           11         130,868        2,185       131,817
 2  20      .97        227,528          65.0            70.4            65.6           13         161,638        2,659       161,655
 2  20      .96        226,849          70.0            82.3            77.1           14         189,102        3,125       189,031
 2  20      .94        226,040          75.0            84.2            80.5           15         193,329        3,265       192,004
 2  20      .92        225,316          80.0            96.0            94.7           16         220,470        3,838       216,974
 2  20      .91        225,225          85.0            97.1            95.4           17         223,032        3,867       219,305
 2  20      .84        224,770          90.0            99.6            99.3           18         228,708        4,023       224,073
 2  20      .82        224,751          95.0            99.7            99.3           19         228,937        4,025       224,251
 2  20      .75        224,711         100.0           100.0           100.0           20         229,537        4,051       224,711

          SUBTOTAL          15

 3  01     1.01        241,655           3.0             2.7             2.5            2           6,515          304         6,580
 3  01     1.00        239,328           4.5             4.1             4.5            3           9,842          548         9,907
 3  01      .99        237,033           6.0             4.2             4.7            4          10,166          573        10,227
 3  01      .95        227,870           9.0             7.6             7.8            6          18,272          950        17,928
 3  01      .93        223,450          12.1            10.9            11.1            8          26,192        1,360        25,294
 3  01      .92        221,319          15.1            14.5            14.6           10          34,855        1,778        33,264
 3  01      .91        219,275          18.1            17.2            17.3           12          41,263        2,108        39,075
 3  01      .90        217,295          22.7            25.7            26.6           15          61,584        3,238        57,384
 3  01      .89        215,518          33.3            41.6            42.9           22          99,553        5,216        91,176
 3  01      .88        214,121          36.3            43.5            45.2           24         104,128        5,493        95,202
 3  01      .87        212,770          37.8            44.4            46.0           25         106,262        5,599        97,059
 3  01      .86        211,440          42.4            47.0            48.8           28         112,548        5,938       102,465
 3  01      .85        210,173          51.5            51.3            53.4           34         122,790        6,494       111,171
 3  01      .84        209,008          57.5            61.9            65.9           38         148,158        8,012       132,480
 3  01      .83        208,097          62.1            65.1            69.8           41         155,863        8,484       139,875
 3  01      .82        207,263          63.6            70.8            74.7           42         169,593        9,080       150,133
 3  01      .81        206,566          65.1            74.2            77.7           43         177,545        9,450       156,574
 3  01      .80        205,949          69.6            78.4            80.8           46         187,737        9,820       164,729
 3  01      .77        204,403          71.2            79.4            81.7           47         190,136        9,933       166,575
 3  01      .76        203,912          75.7            81.9            84.3           50         196,013       10,253       171,042
 3  01      .75        203,479          84.8            88.9            91.0           56         212,846       11,061       183,667
 3  01      .74        203,215          86.3            91.3            92.6           57         218,467       11,257       187,825
 3  01      .73        203,007          89.3            92.0            93.2           59         220,229       11,335       189,112
 3  01      .72        202,817          90.9            92.1            93.3           60         220,389       11,340       189,229
 3  01      .69        202,251          92.4            92.2            93.4           61         220,743       11,357       189,472
 3  01      .68        202,065          95.4            95.8            96.0           63         229,229       11,670       195,242
 3  01      .64        201,664          96.9            95.9            96.1           64         229,507       11,683       195,420
 3  01      .63        201,567          98.4            99.5            99.3           65         238,099       12,077       200,833
 3  01      .62        201,555         100.0           100.0           100.0           66         239,263       12,151       201,555

          SUBTOTAL          29

 3  02     1.05        186,993           4.0             3.1             3.1            2           5,666          113         5,963
 3  02     1.02        181,820           6.1             3.4             3.9            3           6,157          140         6,453
 3  02     1.00        178,382           8.1             5.4             4.5            4           9,701          163         9,994
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RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

AI	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
3	02	.99	176,698	10.2	7.2	10.2	5	12,991	365	13,251
3	02	.98	175,047	16.3	12.6	13.1	8	22,560	469	22,628
3	02	.97	173,491	18.3	15.1	14.2	9	27,012	507	26,947
3	02	.96	171,981	20.4	16.6	15.4	10	29,642	552	29,472
3	02	.95	170,496	26.5	25.4	20.3	13	45,329	726	44,374
3	02	.94	169,169	34.6	32.0	27.3	17	57,145	978	55,481
3	02	.93	167,959	44.8	41.0	34.1	22	73,183	1,219	70,397
3	02	.92	166,910	46.9	43.0	35.1	23	76,640	1,256	73,577
3	02	.91	165,896	51.0	46.1	38.7	25	82,211	1,382	73,647
3	02	.90	164,937	53.0	56.4	51.9	26	100,577	1,856	95,176
3	02	.89	164,162	61.2	60.2	56.4	30	107,363	2,015	101,216
3	02	.87	162,747	67.3	63.4	58.2	33	113,081	2,079	106,193
3	02	.86	162,097	73.4	69.4	61.8	36	123,640	2,207	115,271
3	02	.85	161,553	75.5	70.2	63.0	37	125,078	2,250	116,493
3	02	.83	160,492	79.5	75.6	69.1	39	134,668	2,467	124,453
3	02	.82	160,058	81.6	76.9	69.8	40	137,094	2,493	126,442
3	02	.81	159,648	85.7	83.1	77.1	42	148,158	2,755	135,404
3	02	.79	159,050	89.7	89.4	81.6	44	159,242	2,914	144,161
3	02	.78	158,861	91.8	90.3	83.2	45	160,963	2,973	145,503
3	02	.75	158,347	95.9	97.5	94.3	47	173,744	3,368	155,089
3	02	.73	158,261	100.0	100.0	100.0	49	178,089	3,570	158,261
		SUBTOTAL	24							
3	11	1.21	727,727	1.5	.3	.5	1	2,122	136	2,567
3	11	1.02	613,859	6.3	.3	.5	4	2,186	140	2,632
3	11	1.00	601,874	17.4	2.1	2.5	11	12,889	684	13,335
3	11	.99	595,989	22.2	6.4	6.8	14	38,962	1,819	39,143
3	11	.98	590,364	23.8	6.5	6.8	15	39,142	1,823	39,324
3	11	.97	584,741	28.5	10.6	10.9	18	64,109	2,927	63,542
3	11	.96	579,368	33.3	16.1	16.3	21	96,940	4,341	95,060
3	11	.95	574,323	38.0	18.0	18.5	24	108,547	4,928	106,085
3	11	.93	564,466	42.8	21.4	21.9	27	129,295	5,834	125,382
3	11	.92	559,744	47.6	27.6	28.9	30	166,097	7,707	159,243
3	11	.91	555,391	52.3	35.5	37.3	33	213,727	9,932	202,583
3	11	.90	551,514	55.5	35.9	37.7	35	215,975	10,052	204,606
3	11	.89	547,660	61.9	46.1	48.0	39	277,653	12,795	259,503
3	11	.88	544,422	68.2	50.4	52.5	43	303,151	13,980	281,939
3	11	.87	541,439	69.8	50.7	52.8	44	305,209	14,069	283,727
3	11	.86	538,477	73.0	56.8	59.4	46	342,071	15,828	315,430
3	11	.85	535,883	76.1	60.0	62.4	48	361,147	16,630	331,644
3	11	.84	533,481	79.3	64.2	66.7	50	386,399	17,764	352,855
3	11	.82	529,180	80.9	66.0	68.3	51	397,437	18,195	361,907
3	11	.81	527,140	82.5	66.9	69.0	52	402,851	18,377	366,293
3	11	.79	523,169	85.7	68.5	70.6	54	412,004	18,797	373,524
3	11	.78	521,274	88.8	81.6	81.8	56	490,859	21,796	435,030
3	11	.77	520,169	90.4	82.1	82.4	57	494,349	21,953	437,719
3	11	.76	519,098	92.0	82.9	82.9	58	498,610	22,089	440,955
3	11	.75	518,073	93.6	94.2	84.5	59	506,969	22,510	447,225

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

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                                  PERCENT OF   PERCENT OF   PERCENT OF   CUMULATIVE   CUMULATIVE   CUMULATIVE   CUMULATIVE
          SCHEDULE   TOTAL        PHYSICIANS   RVS UNITS    SERVICES     NUMBER OF    NUMBER OF    NUMBER OF    COST OF
AD SPC    AMOUNT     COST      ABOVE SCHEDULE ABOVE SCHEDULE ABOVE SCHEDULE PHYSICIANS RVS UNITS   SERVICES     SERVICES

 3  11      .74     517,125       95.2         85.7         85.8          60        515,704       22,861       453,683
 3  11      .73     516,268       96.8         88.8         89.2          61        534,525       23,747       467,423
 3  11      .69     513,592       98.4         97.8         98.4          62        588,581       26,201       504,727
 3  11      .66     513,206      100.0        100.0        100.0          63        601,428       26,615       513,206

          SUBTOTAL       29

 3  18      .98     123,334        5.0          2.6          3.4           1          3,362           73         3,294
 3  18      .94     118,435       10.0          3.9          7.0           2          4,961          151         4,797
 3  18      .93     117,226       15.0         20.1         14.0           3         25,393          301        23,799
 3  18      .91     115,217       20.0         21.9         16.1           4         27,588          346        25,797
 3  18      .90     114,234       25.0         21.9         16.2           5         27,608          347        25,815
 3  18      .89     113,252       30.0         24.2         21.5           6         30,517          460        28,404
 3  18      .88     112,298       40.0         37.0         39.2           8         46,676          840        42,623
 3  18      .87     111,507       45.0         45.6         47.1           9         57,505        1,009        52,045
 3  18      .85     110,140       50.0         58.4         54.8          10         73,587        1,173        65,714
 3  18      .84     109,617       65.0         73.3         64.9          13         92,340        1,388        81,467
 3  18      .82     108,947       70.0         80.3         73.4          14        101,068        1,570        88,624
 3  18      .79     108,203       75.0         82.2         74.8          15        103,470        1,601        90,521
 3  18      .76     107,532       80.0         82.8         76.8          16        104,206        1,642        91,081
 3  18      .74     107,099       85.0         84.5         80.7          17        106,426        1,727        92,724
 3  18      .72     106,710       90.0         90.4         89.9          18        113,834        1,924        98,057
 3  18      .70     106,470       95.0         94.9         96.5          19        119,538        2,064       102,053
 3  18      .65     106,154      100.0        100.0        100.0          20        125,852        2,138       106,154

          SUBTOTAL       17

 3  20     1.05     163,205        5.8          2.6          2.2           1          4,127           56         4,333
 3  20     1.03     160,179       11.7         16.2         14.0           2         25,250          350        26,033
 3  20     1.01     157,575       17.6         18.2         16.9           3         28,341          423        29,211
 3  20     1.00     156,304       29.4         24.6         23.9           5         38,274          596        39,144
 3  20      .95     150,446       41.1         40.9         40.4           7         63,670        1,006        63,271
 3  20      .94     149,529       47.0         43.2         42.2           8         67,273        1,053        66,657
 3  20      .93     148,647       52.9         57.1         62.3           9         88,837        1,553        86,712
 3  20      .92     147,981       58.8         59.8         65.3          10         93,026        1,627        90,565
 3  20      .91     147,357       64.7         68.5         68.5          11        106,517        1,707       102,843
 3  20      .90     146,868       70.5         72.8         74.2          12        113,161        1,848       108,822
 3  20      .87     145,600       76.4         73.5         76.2          13        114,269        1,898       109,786
 3  20      .84     144,365       82.3         80.1         83.2          14        124,572        2,072       118,441
 3  20      .80     143,130       88.2         90.1         90.2          15        140,111        2,246       130,872
 3  20      .78     142,824       94.1         95.5         95.2          16        148,485        2,372       137,404
 3  20      .76     142,685      100.0        100.0        100.0          17        155,434        2,490       142,685

          SUBTOTAL       15

 4  91     1.02     414,621        1.5           .0           .0           1             20            1            20
 4  91      .94     362,104        4.7          1.3          1.4           3          5,577          393         5,243
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A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
4	01	.93	378,094	6.4	1.8	2.0	4	7,679	540	7,198
4	01	.91	370,118	15.8	14.8	15.3	10	60,508	4,137	55,273
4	01	.90	366,658	22.2	23.6	23.2	14	95,956	6,281	87,175
4	01	.89	363,551	34.9	45.0	43.1	22	183,138	11,635	164,768
4	01	.88	361,319	38.0	48.3	46.7	24	196,531	12,603	176,554
4	01	.87	359,220	42.8	57.1	55.5	27	232,456	14,986	207,809
4	01	.86	357,479	47.6	60.0	58.9	30	244,144	15,896	217,863
4	01	.85	355,856	53.9	66.0	64.6	34	268,287	17,430	238,382
4	01	.84	354,474	58.7	69.4	67.8	37	282,360	18,289	250,203
4	01	.63	353,233	68.2	75.5	74.3	43	307,002	20,049	270,656
4	01	.81	351,243	69.8	76.6	75.1	44	311,672	20,276	274,439
4	01	.79	349,346	73.0	77.1	75.5	46	313,531	20,379	275,907
4	01	.78	348,417	82.5	84.1	83.7	52	342,021	22,579	298,123
4	01	.76	347,127	84.1	85.5	84.8	53	347,750	22,887	302,483
4	01	.75	346,540	85.7	87.9	87.0	54	357,475	23,475	309,777
4	01	.74	346,050	87.3	90.8	89.8	55	369,122	24,230	318,396
4	01	.70	344,555	90.4	91.6	90.8	57	372,387	24,501	320,681
4	01	.68	343,873	92.0	92.6	91.7	58	376,708	24,742	323,620
4	01	.67	343,575	93.6	93.7	92.8	59	381,088	25,043	326,554
4	01	.66	343,321	96.8	97.9	98.2	61	398,069	26,493	337,762
4	01	.65	343,237	98.4	99.3	99.4	62	403,800	26,819	341,487
4	01	.63	343,183	100.0	100.0	100.0	63	406,492	26,974	343,193
		SUBTOTAL	24							
4	02	1.01	255,299	2.4	.2	.3	1	530	19	535
4	02	1.00	252,777	7.3	3.2	1.7	3	8,238	82	8,243
4	02	.99	250,331	9.7	4.8	4.7	4	12,362	227	12,326
4	02	.98	247,927	14.6	7.9	6.8	6	20,146	327	19,954
4	02	.97	245,601	19.5	11.2	8.6	8	28,407	415	27,967
4	02	.96	243,357	26.8	17.8	13.9	11	45,161	667	44,051
4	02	.95	241,281	29.2	18.1	14.3	12	45,780	688	44,639
4	02	.94	239,211	39.0	27.5	19.1	16	69,733	916	67,155
4	02	.93	237,381	48.7	40.3	32.5	20	102,078	1,554	97,236
4	02	.92	235,874	56.0	56.6	38.9	23	143,109	1,860	134,984
4	02	.91	234,777	60.9	59.3	42.2	25	149,923	2,017	141,185
4	02	.90	233,749	63.4	62.8	49.0	26	158,933	2,345	149,294
4	02	.89	232,811	68.2	66.5	54.2	28	168,344	2,591	157,670
4	02	.88	231,966	78.0	75.8	63.6	32	191,772	3,039	178,285
4	02	.86	230,746	80.4	77.2	67.4	33	195,254	3,221	181,281
4	02	.85	230,171	82.9	78.9	69.1	34	199,618	3,303	184,990
4	02	.84	229,640	85.3	80.3	74.4	35	203,152	3,556	187,959
4	02	.81	228,151	87.8	84.3	87.6	36	213,102	4,190	196,018
4	02	.80	227,154	90.2	93.5	94.7	37	236,376	4,528	214,637
4	02	.76	227,098	92.6	93.7	94.7	38	236,875	4,529	215,017
4	02	.73	226,622	95.1	94.5	97.4	39	238,898	4,658	216,494
4	02	.71	226,344	97.5	99.9	99.9	40	252,700	4,775	226,293
4	02	.58	226,335	100.0	100.0	100.0	41	252,772	4,778	226,335
		SUBTOTAL	23							

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
4	11	1.06	539,403	2.3	.1	.4	1	583	118	617
4	11	.97	493,657	4.6	2.5	3.8	2	12,769	947	12,438
4	11	.93	473,813	9.3	6.3	8.2	4	32,089	2,047	30,405
4	11	.91	464,277	16.2	24.6	27.2	7	125,667	6,766	115,561
4	11	.90	460,445	25.5	30.4	32.8	11	154,933	8,160	141,901
4	11	.89	456,906	30.2	31.2	33.6	13	159,206	8,364	145,704
4	11	.88	453,409	32.5	37.9	40.1	14	193,248	9,979	175,661
4	11	.87	450,253	37.2	49.5	52.7	16	252,319	13,108	227,053
4	11	.86	447,687	41.8	53.1	56.2	18	270,675	13,964	242,833
4	11	.85	445,305	55.8	64.7	65.7	24	329,301	16,315	292,671
4	11	.84	443,510	62.7	70.5	71.0	27	358,774	17,630	317,428
4	11	.83	442,009	65.1	70.5	71.0	28	358,834	17,632	317,478
4	11	.82	440,508	72.0	74.6	74.4	31	379,712	18,495	334,598
4	11	.80	437,925	74.4	76.8	76.7	32	391,093	19,066	343,703
4	11	.78	435,570	76.7	78.7	78.4	33	400,983	19,469	351,417
4	11	.77	434,491	81.3	83.7	83.0	35	426,205	20,630	370,818
4	11	.76	433,664	88.3	92.0	91.6	38	468,417	22,761	402,913
4	11	.75	433,259	93.0	96.2	95.9	40	489,966	23,835	419,081
4	11	.74	433,070	97.6	99.3	99.0	42	505,547	24,588	430,611
4	11	.66	432,805	100.0	100.0	100.0	43	508,871	24,830	432,805
		SUBTOTAL	20							
4	18	.95	266,080	16.6	9.2	12.8	2	25,268	675	24,004
4	18	.94	257,595	25.0	25.7	31.9	3	70,507	1,680	66,523
4	18	.93	255,562	41.6	57.0	66.4	5	156,060	3,494	146,093
4	18	.92	254,385	50.0	59.6	70.2	6	163,208	3,691	152,663
4	18	.90	252,174	58.3	71.1	74.6	7	194,755	3,922	181,062
4	18	.86	249,014	66.6	84.4	77.3	8	231,296	4,066	212,487
4	18	.81	246,890	75.0	88.6	85.8	9	242,659	4,511	221,691
4	18	.80	246,579	83.3	88.8	86.6	10	243,207	4,554	222,123
4	18	.79	246,273	91.6	99.7	99.3	11	273,179	5,223	245,807
4	18	.71	246,226	100.0	100.0	100.0	12	273,769	5,255	246,225
		SUBTOTAL	10							
4	20	.99	97,842	7.6	12.8	15.7	1	12,684	320	12,557
4	20	.96	95,258	23.0	47.6	43.4	3	47,071	882	45,568
4	20	.95	94,740	30.7	54.8	54.3	4	54,162	1,102	52,305
4	20	.94	94,293	38.4	77.8	62.1	5	76,903	1,261	73,678
4	20	.93	94,074	46.1	83.3	74.1	6	82,376	1,504	78,771
4	20	.91	93,745	53.8	87.6	81.3	7	86,589	1,650	82,695
4	20	.90	93,623	61.5	91.1	86.4	8	90,124	1,755	85,786
4	20	.89	93,536	69.2	92.8	89.4	9	91,803	1,814	87,281
4	20	.88	93,465	76.9	93.5	90.6	10	92,474	1,839	87,871
4	20	.86	93,338	84.6	97.5	95.9	11	96,393	1,947	91,241
4	20	.78	93,143	92.3	99.8	99.8	12	98,727	2,025	93,062
4	20	.60	93,124	100.0	100.0	100.0	13	98,831	2,029	93,124
		SUBTOTAL	12							

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

AY	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
5	01	1.04	428,260	2.0	8.2	9.3	1	33,814	2,415	35,165
5	01	1.02	420,701	4.1	10.6	12.2	2	43,986	3,176	45,542
5	01	1.01	417,023	6.2	11.9	13.3	3	49,208	3,475	50,815
5	01	.99	409,771	10.4	14.8	16.3	5	61,243	4,242	62,733
5	01	.98	406,265	14.5	26.3	26.4	7	108,319	6,856	108,865
5	01	.97	403,231	22.9	31.1	31.0	11	128,073	8,059	128,026
5	01	.96	400,394	33.3	38.8	38.6	16	159,970	10,033	158,647
5	01	.95	397,875	41.6	40.9	40.8	20	168,441	10,602	166,695
5	01	.94	395,442	50.0	45.5	46.1	24	187,662	11,972	184,763
5	01	.93	393,201	54.1	46.3	47.1	26	190,849	12,238	187,726
5	01	.91	388,782	60.4	49.1	50.1	29	202,227	13,316	198,083
5	01	.90	386,686	62.5	50.4	51.8	30	207,683	13,450	202,991
5	01	.89	384,645	64.5	51.6	52.9	31	212,521	13,741	207,297
5	01	.88	382,652	70.8	55.4	56.8	34	228,321	14,747	221,201
5	01	.87	380,818	72.9	58.1	59.3	35	239,647	15,399	231,054
5	01	.84	375,654	81.2	69.1	72.1	39	284,919	18,738	269,083
5	01	.83	374,385	83.3	76.7	79.6	40	315,869	20,685	294,771
5	01	.82	373,426	87.5	86.4	89.0	42	355,808	23,120	327,521
5	01	.81	372,866	93.7	89.4	92.5	45	368,196	24,029	337,555
5	01	.79	371,994	97.9	98.8	99.1	47	407,014	25,741	368,222
5	01	.76	371,851	100.0	100.0	100.0	48	411,789	25,955	371,851
		SUBTOTAL	21							
5	02	1.04	92,287	7.6	7.4	9.2	1	6,637	208	6,902
5	02	.97	86,540	15.3	15.6	23.4	2	13,907	530	13,954
5	02	.96	85,792	23.0	25.9	46.2	3	23,005	1,044	22,688
5	02	.95	85,134	46.1	41.8	53.4	6	37,110	1,206	36,089
5	02	.94	84,618	61.5	76.1	66.1	8	67,537	1,493	64,689
5	02	.93	84,406	69.2	80.1	68.6	9	71,123	1,550	69,024
5	02	.92	84,230	84.6	91.7	78.0	11	81,436	1,762	77,512
5	02	.91	84,157	92.3	98.8	97.5	12	87,678	2,202	83,192
5	02	.85	84,093	100.0	100.0	100.0	13	88,738	2,257	84,093
		SUBTOTAL	9							
5	11	1.03	425,031	3.7	3.6	3.7	1	15,098	792	15,550
5	11	1.02	421,056	7.4	8.5	7.3	2	35,117	1,564	35,970
5	11	1.01	417,280	11.1	11.7	10.2	3	48,588	2,180	49,576
5	11	.99	409,999	18.5	28.7	30.2	5	118,719	6,431	119,005
5	11	.98	407,060	37.0	53.4	51.5	10	220,536	10,960	218,785
5	11	.97	405,138	40.7	57.9	55.9	11	239,109	11,893	236,802
5	11	.96	403,403	44.4	61.7	59.7	12	254,864	12,714	251,926
5	11	.95	401,825	51.8	66.8	64.8	14	275,710	13,803	271,733
5	11	.93	399,086	59.2	69.5	67.5	16	287,174	14,367	282,392
5	11	.92	397,831	62.9	72.4	70.3	17	299,046	14,965	293,314
5	11	.91	396,695	70.3	80.2	77.8	19	331,159	16,568	322,537
5	11	.84	394,251	74.0	82.0	79.5	20	338,589	16,920	329,075

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                                      PERCENT OF     PERCENT OF      PERCENT OF   CUMULATIVE   CUMULATIVE   CUMULATIVE   CUMULATIVE
         SCHEDULE      TOTAL         PHYSICIANS      RVS UNITS        SERVICES     NUMBER OF    NUMBER OF    NUMBER OF     COST OF
AG SPC    AMOUNT        COST       ABOVE SCHEDULE ABOVE SCHEDULE ABOVE SCHEDULE PHYSICIANS    RVS UNITS     SERVICES     SERVICES

 5  11      .87       393,510          77.7           87.1            86.5           21        359,730       18,418       347,468
 5  11      .80       389,805          81.4           87.1            86.5           22        359,780       18,419       347,508
 5  11      .78       388,748          85.1           89.7            89.1           23        370,330       18,975       355,737
 5  11      .76       387,902          88.8           93.1            92.0           24        384,401       19,586       366,431
 5  11      .75       387,619          92.5           95.4            94.5           25        393,725       20,118       373,424
 5  11      .73       387,241          96.2           99.7            99.8           26        411,696       21,239       386,543
 5  11      .71       387,221         100.0          100.0           100.0           27        412,652       21,274       387,221

          SUBTOTAL         19


 5  18      .89        61,241          14.2           20.0            22.2            1         13,783          300        12,265
 5  18      .86        59,590          28.5           44.6            43.5            2         30,716          589        26,829
 5  18      .85        59,210          42.8           61.8            64.3            3         42,582          869        36,915
 5  18      .84        58,947          71.4           67.7            80.2            5         46,602        1,084        40,292
 5  18      .83        58,725          85.7           71.5            86.1            6         49,245        1,164        42,485
 5  18      .66        55,399         100.0          100.0           100.0            7         68,811        1,351        55,399

          SUBTOTAL          6


 5  20     1.09        86,562          14.2             .0              .0            1             50            1            54
 5  20     1.04        82,594          28.5            7.9             3.7            2          6,284           43         6,537
 5  20     1.03        81,862          42.8           35.0            39.1            3         27,844          453        28,744
 5  20     1.00        80,315          57.1           56.2            61.6            4         44,685          713        45,505
 5  20      .99        79,968          71.4           73.0            76.4            5         58,033          884        58,800
 5  20      .94        78,899          85.7           88.6            89.9            6         70,406        1,040        70,433
 5  20      .87        78,268         100.0          100.0           100.0            7         79,415        1,156        78,268

          SUBTOTAL          7


 6  01     1.04       236,593           2.1            1.5             2.3            1          3,432          272         3,563
 6  01     1.01       229,871           6.5            4.4             5.9            3         10,163          696        10,367
 6  01     1.00       227,698           8.6            4.4             6.0            4         10,183          697        10,387
 6  01      .96       219,006          10.8            6.7             8.4            5         15,393          979        15,383
 6  01      .95       216,885          17.3           16.4            20.4            8         37,514        2,371        36,404
 6  01      .94       214,985          19.5           17.2            21.6            9         39,345        2,516        38,125
 6  01      .92       211,222          21.7           19.8            24.9           10         45,114        2,891        43,432
 6  01      .91       209,398          23.9           20.9            26.4           11         47,754        3,065        45,835
 6  01      .89       205,803          28.2           23.9            29.0           13         54,375        3,374        51,727
 6  01      .88       204,072          36.9           30.2            34.8           17         68,840        4,045        64,457
 6  01      .87       202,486          43.4           33.6            37.8           20         76,633        4,395        71,236
 6  01      .86       200,977          50.0           37.9            42.4           23         86,444        4,927        79,674
 6  01      .84       198,156          52.1           47.3            53.7           24        107,793        6,234        97,607
 6  01      .83       196,959          58.6           50.3            56.1           27        114,492        6,516       103,167
 6  01      .82       195,829          65.2           57.7            62.5           30        131,297        7,259       116,947
 6  01      .81       194,857          69.5           64.5            68.9           32        146,889        7,995       129,577
 6  01      .78       192,443          71.7           69.5            74.5           33        158,256        8,651       138,443
 6  01      .77       191,756          80.4           79.7            82.9           37        181,533        9,623       156,366
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AREA-SPECIALTY SPECIFIC

AY	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
6	01	.76	191,297	82.6	82.1	84.8	38	186,789	9,843	163,361
6	01	.74	190,483	84.7	83.5	86.1	39	190,134	10,001	162,836
6	01	.73	190,109	89.1	86.9	89.2	41	197,724	10,358	168,377
6	01	.71	189,514	91.3	87.2	89.4	42	198,404	10,374	168,860
6	01	.69	188,932	95.6	97.2	97.1	44	221,147	11,271	184,552
6	01	.68	188,868	97.8	97.7	97.7	45	222,376	11,345	185,388
6	01	.60	188,459	100.0	100.0	100.0	46	227,494	11,603	188,459
		SUBTOTAL	25							
6	02	1.12	102,867	4.3	2.1	2.6	1	2,004	53	2,244
6	02	1.07	98,375	17.3	14.2	10.0	4	13,107	201	14,124
6	02	1.05	96,800	26.0	29.7	36.0	6	27,319	719	29,047
6	02	1.03	95,510	34.7	38.4	42.9	8	35,339	857	37,307
6	02	1.02	94,945	43.4	52.1	52.6	10	47,913	1,050	50,133
6	02	1.01	94,505	47.8	54.2	55.0	11	49,804	1,098	52,043
6	02	.98	93,244	52.1	55.7	56.9	12	51,232	1,135	53,442
6	02	.97	92,838	60.8	66.5	67.3	14	61,080	1,343	62,995
6	02	.95	92,222	65.2	66.9	68.2	15	61,460	1,361	63,155
6	02	.94	91,919	73.9	71.0	71.5	17	65,258	1,427	66,925
6	02	.92	91,387	82.6	82.5	82.8	19	75,792	1,653	76,617
6	02	.89	90,905	86.9	83.3	84.8	20	76,524	1,691	77,253
6	02	.79	89,373	91.3	96.5	89.8	21	88,658	1,792	85,855
6	02	.75	89,246	95.6	96.5	89.9	22	88,718	1,794	86,903
6	02	.71	89,120	100.0	100.0	100.0	23	91,846	1,994	89,120
		SUBTOTAL	15							
6	11	1.16	386,654	2.5	2.0	2.1	1	6,743	346	7,821
6	11	1.13	376,857	5.0	4.2	4.4	2	14,144	726	16,185
6	11	1.12	373,665	7.5	7.6	7.9	3	25,419	1,300	28,813
6	11	1.05	352,112	10.0	7.8	8.1	4	26,067	1,340	29,493
6	11	1.03	345,967	12.5	10.5	10.7	5	35,022	1,763	38,717
6	11	1.02	342,984	17.5	13.3	13.6	7	44,597	2,237	48,483
6	11	1.00	337,209	25.0	19.4	19.9	10	64,796	3,273	68,682
6	11	.99	334,524	37.5	33.8	34.5	15	112,789	5,676	116,195
6	11	.98	332,318	42.5	36.6	37.0	17	122,096	6,085	125,316
6	11	.97	330,206	50.0	42.9	42.7	20	143,304	7,016	145,898
6	11	.96	328,306	55.0	55.3	55.0	22	184,509	9,030	185,445
6	11	.95	326,818	60.0	61.1	59.7	24	203,966	9,807	203,929
6	11	.94	325,524	62.5	64.4	64.2	25	214,765	10,536	214,090
6	11	.91	321,968	70.0	71.6	70.9	28	238,796	11,648	235,948
6	11	.90	321,022	75.0	77.3	76.8	30	257,964	12,611	253,193
6	11	.89	320,269	80.0	79.7	78.7	32	265,764	12,921	260,141
6	11	.88	319,573	85.0	85.9	85.4	34	286,393	14,017	278,295
6	11	.87	319,124	87.5	88.9	89.3	35	296,518	14,667	287,103
6	11	.86	318,756	90.0	89.2	89.6	36	297,622	14,706	289,053
6	11	.85	318,399	92.5	90.3	90.4	37	301,166	14,850	291,055

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
6	11	.82	317,434	95.0	91.5	91.4	38	305,193	15,009	294,367
6	11	.78	316,309	97.5	91.8	91.9	39	306,059	15,087	295,043
6	11	.75	315,491	100.0	100.0	100.0	40	333,323	16,411	315,491
		SUBTOTAL	23							
6	18	.90	38,460	8.3	10.0	7.4	1	4,281	77	3,852
6	18	.89	38,076	16.6	19.4	19.8	2	8,293	206	7,423
6	18	.88	37,731	33.3	38.3	38.4	4	16,368	400	14,529
6	18	.87	37,468	41.6	54.6	62.3	5	23,338	648	20,531
6	18	.83	36,692	50.0	62.5	70.9	6	26,716	738	23,397
6	18	.82	36,531	58.3	78.8	86.0	7	33,696	895	29,123
6	18	.81	36,441	66.6	85.9	90.5	8	36,742	942	31,588
6	18	.76	36,142	83.3	99.7	99.7	10	42,624	1,037	36,058
6	18	.75	36,140	91.6	99.7	99.8	11	42,644	1,038	36,073
6	18	.68	36,134	100.0	100.0	100.0	12	42,734	1,040	36,134
		SUBTOTAL	10							
6	20	1.20	36,195	10.0	24.8	19.9	1	7,491	148	8,989
6	20	1.12	34,381	20.0	29.9	30.3	2	9,020	225	10,701
6	20	1.03	32,478	30.0	32.2	34.6	3	9,731	257	11,434
6	20	1.02	32,274	40.0	37.1	38.3	4	11,209	284	12,941
6	20	1.00	31,895	50.0	40.7	42.9	5	12,295	318	14,027
6	20	.98	31,538	60.0	57.4	67.8	6	17,338	503	18,969
6	20	.97	31,409	70.0	73.1	87.7	7	22,059	650	23,549
6	20	.94	31,166	80.0	98.9	98.7	8	29,833	732	30,855
6	20	.93	31,163	90.0	99.4	99.5	9	29,993	738	31,005
6	20	.75	31,132	100.0	100.0	100.0	10	30,163	741	31,132
		SUBTOTAL	10							
7	01	1.01	241,549	2.9	4.6	2.5	1	11,149	280	11,260
7	01	1.00	239,269	5.8	16.2	18.1	2	38,786	1,991	38,897
7	01	.99	237,265	8.8	16.9	19.0	3	40,439	2,091	40,533
7	01	.96	231,304	11.7	22.2	25.5	4	53,254	2,804	52,836
7	01	.90	220,149	17.6	25.2	28.3	6	60,351	3,110	59,223
7	01	.87	214,785	20.5	29.0	32.4	7	69,356	3,562	67,058
7	01	.85	211,389	23.5	29.5	33.1	8	70,732	3,630	63,227
7	01	.83	208,021	41.1	42.1	46.9	14	100,919	5,152	93,282
7	01	.82	206,618	50.0	53.1	56.9	17	127,017	6,242	114,693
7	01	.81	205,517	55.8	60.2	63.1	19	144,202	6,927	129,603
7	01	.80	204,567	70.5	70.0	70.2	24	167,539	7,699	147,272
7	01	.79	203,851	76.4	70.8	71.2	26	169,426	7,811	148,763
7	01	.78	203,154	79.4	74.2	74.1	27	177,646	8,133	155,174
7	01	.76	201,924	85.2	80.4	79.6	29	192,482	8,733	166,453
7	01	.75	201,457	89.2	83.5	79.6	30	192,538	8,736	166,492

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                                           PVS BASED FEE SCHEDULE SIMULATION
                                                AREA-SPECIALTY SPECIFIC

                                      PERCENT OF     PERCENT OF     PERCENT OF    CUMULATIVE   CUMULATIVE    CUMULATIVE    CUMULATIVE
         SCHEDULE      TOTAL          PHYSICIANS     RVS UNITS      SERVICES      NUMBER OF    NUMBER OF     NUMBER OF      COST OF
AY SPC    AMOUNT       COST         ABOVE SCHEDULE ABOVE SCHEDULE ABOVE SCHEDULE PHYSICIANS    RVS UNITS     SERVICES       SERVICES

 7  01       .73      200,524          91.1           80.5           79.8           31         192,641        8,750        166,557
 7  01       .70      199,129          97.0           88.1           88.3           33         210,795        9,687        179,275
 7  01       .69      198,845         100.0          100.0          100.0           34         239,150       10,962        198,845

          SUBTOTAL        18

 7  02      1.12      146,296           3.2             .7             .1            1             958            6          1,072
 7  02      1.06      138,516           6.4             .7             .2            2           1,033            9          1,152
 7  02      1.04      135,925           9.6            2.1            3.4            3           2,826          123          3,017
 7  02      1.03      134,647          12.9            2.5            3.5            4           3,277          126          3,481
 7  02      1.00      130,826          16.1            3.6            4.5            5           4,756          160          4,963
 7  02       .98      128,309          25.8           13.1            8.9            8          17,145          319         17,191
 7  02       .97      127,174          35.4           25.5           24.8           11          33,414          884         32,882
 7  02       .96      126,202          38.7           26.2           26.3           12          34,313          936         33,745
 7  02       .95      125,239          41.9           46.8           38.3           13          61,240        1,365         59,326
 7  02       .94      124,545          51.6           60.4           55.5           16          78,915        1,976         75,941
 7  02       .92      123,511          58.0           61.9           56.3           18          80,912        2,002         77,778
 7  02       .90      122,517          61.2           64.5           56.5           19          84,330        2,012         80,854
 7  02       .89      122,054          64.5           70.0           60.5           20          91,492        2,152         87,229
 7  02       .88      121,663          70.9           70.7           61.3           22          92,471        2,182         89,090
 7  02       .87      121,281          77.4           74.6           64.1           24          97,521        2,282         92,483
 7  02       .86      120,950          80.6           77.3           68.2           25         101,011        2,426         95,485
 7  02       .85      120,654          87.0           77.6           68.3           27         101,492        2,429         95,893
 7  02       .83      120,071          90.3           82.7           72.9           28         108,041        2,593        101,329
 7  02       .79      119,168          93.5           91.3           86.3           29         119,383        3,070        110,283
 7  02       .77      118,943          96.7           99.7           99.7           30         130,273        3,545        118,675
 7  02       .64      118,898         100.0          100.0          100.0           31         130,622        3,555        118,898

          SUBTOTAL        21

 7  11      1.09      855,857           1.1             .0             .0            1              50            1             54
 7  11      1.08      848,005           2.3             .3             .4            2           3,049          142          3,293
 7  11      1.06      832,362           4.6             .4             .5            4           3,843          186          4,135
 7  11      1.04      816,735           5.8             .5             .5            5           4,103          192          4,405
 7  11      1.03      808,925           6.9            1.5            1.5            6          12,187          538         12,731
 7  11      1.02      801,195          10.4            1.6            1.6            9          12,893          571         13,452
 7  11      1.01      793,472          11.6            1.6            1.6           10          13,009          578         13,569
 7  11      1.00      785,750          18.6            3.7            3.6           16          29,299        1,282         29,859
 7  11       .99      778,191          20.9            4.2            4.3           18          33,646        1,506         34,162
 7  11       .98      770,675          29.0           12.9           13.5           25         101,682        4,681        100,839
 7  11       .97      763,840          32.5           14.3           14.9           28         112,972        5,165        111,789
 7  11       .96      757,118          34.8           16.1           16.5           30         126,618        5,736        124,889
 7  11       .95      750,532          44.1           32.4           32.9           38         254,649       11,407        246,518
 7  11       .94      745,227          46.5           35.1           35.6           40         275,847       12,369        266,445
 7  11       .93      740,134          48.8           40.6           42.4           42         318,882       14,712        306,467
 7  11       .92      735,471          52.3           41.6           43.5           45         327,395       15,102        314,299
 7  11       .91      730,893          56.9           43.8           45.7           49         343,937       15,853        329,352
 7  11       .90      726,480          59.3           49.9           51.7           51         392,165       17,949        372,759
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RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
7	11	.89	722,550	60.4	53.0	54.7	52	416,628	18,959	394,530
7	11	.88	718,864	63.9	55.1	56.9	55	432,943	19,719	408,887
7	11	.87	715,342	66.2	57.7	60.4	57	453,517	20,959	426,785
7	11	.86	712,025	67.4	58.2	60.8	58	457,712	21,092	430,374
7	11	.85	708,750	70.9	67.1	69.4	61	527,090	24,057	489,355
7	11	.84	706,169	74.4	72.0	73.4	64	565,527	25,454	521,652
7	11	.83	703,973	75.5	72.2	73.6	65	567,451	25,532	523,249
7	11	.82	701,795	77.9	76.2	77.6	67	598,362	26,903	548,595
7	11	.81	699,927	79.0	78.7	79.7	68	618,174	27,625	564,644
7	11	.80	698,257	83.7	84.9	86.0	72	666,861	29,818	603,594
7	11	.79	697,073	84.8	86.4	87.9	73	678,952	30,486	613,145
7	11	.78	696,011	88.3	94.4	95.4	76	741,399	33,086	661,854
7	11	.77	695,573	89.5	95.9	96.9	77	753,684	33,582	671,314
7	11	.76	695,258	90.6	96.0	96.9	78	754,032	33,603	671,578
7	11	.75	694,947	91.8	96.9	97.7	79	761,001	33,869	676,805
7	11	.74	694,705	93.0	97.2	98.0	80	763,913	33,968	678,960
7	11	.72	694,279	95.3	98.8	99.1	82	775,961	34,352	687,634
7	11	.71	694,187	97.6	98.9	99.1	84	776,920	34,371	688,315
7	11	.67	693,856	98.8	99.9	99.9	85	784,440	34,630	693,353
7	11	.62	693,818	100.0	100.0	100.0	86	785,190	34,654	693,818
		SUBTOTAL	38							
7	18	1.04	254,168	12.5	7.2	11.6	2	17,626	418	18,331
7	18	1.03	251,901	18.7	23.5	29.5	3	57,458	1,055	59,359
7	18	1.02	250,031	31.2	34.1	39.3	5	83,512	1,407	85,933
7	18	1.01	248,422	37.5	36.5	41.6	6	89,379	1,490	91,853
7	18	1.00	246,872	56.2	56.6	58.6	9	138,548	2,098	141,027
7	18	.97	243,697	62.5	62.1	68.7	10	151,790	2,458	153,872
7	18	.94	240,919	68.7	66.2	71.2	11	161,826	2,549	163,306
7	18	.92	239,267	75.0	69.5	78.3	12	170,004	2,802	170,830
7	18	.91	238,524	81.2	90.7	90.0	13	221,739	3,221	217,909
7	18	.90	238,297	87.5	93.4	94.6	14	228,380	3,383	223,885
7	18	.81	236,856	93.7	97.6	98.6	15	238,601	3,526	232,164
7	18	.76	236,566	100.0	100.0	100.0	16	244,393	3,576	236,555
		SUBTOTAL	12							
7	20	1.33	285,399	6.6	3.4	7.5	1	7,487	348	9,957
7	20	1.29	277,115	13.3	4.3	8.5	2	9,238	396	12,215
7	20	1.22	262,741	20.0	34.5	30.4	3	74,059	1,402	91,298
7	20	1.19	258,525	26.6	35.7	33.0	4	76,650	1,521	94,381
7	20	1.17	255,766	33.3	49.0	51.5	5	105,286	2,377	127,885
7	20	1.14	252,487	40.0	49.1	51.6	6	105,385	2,381	127,993
7	20	1.11	249,211	46.6	50.7	54.6	7	108,935	2,519	131,939
7	20	1.08	246,041	53.3	69.7	74.0	8	149,754	3,413	176,023
7	20	1.07	245,393	60.0	71.2	75.5	9	152,881	3,482	179,369
7	20	1.05	244,159	66.6	80.0	79.5	10	171,883	3,665	193,321

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
7	20	1.00	242,024	73.3	83.9	83.3	11	180,236	3,842	207,674
7	20	.97	240,993	80.0	92.0	90.9	12	197,545	4,192	224,464
7	20	.94	240,482	86.6	97.5	98.3	13	209,271	4,535	235,485
7	20	.93	240,429	93.3	99.9	99.8	14	214,425	4,602	240,279
7	20	.92	240,427	100.0	100.0	100.0	15	214,586	4,609	240,427
		SUBTOTAL	15							
8	01	1.03	141,591	3.5	1.6	2.3	1	2,212	149	2,279
8	01	1.02	140,238	7.1	4.1	5.2	2	5,734	340	5,870
8	01	1.01	138,921	10.7	5.0	6.3	3	6,957	407	7,105
8	01	.96	132,395	14.2	6.2	7.7	4	8,604	502	8,687
8	01	.95	131,107	17.8	6.5	8.0	5	9,039	521	9,109
8	01	.94	129,822	21.4	11.4	12.7	6	15,737	824	15,396
8	01	.92	127,388	28.5	26.1	27.8	8	35,881	1,796	33,929
8	01	.91	126,372	32.1	30.1	31.4	9	41,390	2,031	38,942
8	01	.90	125,411	46.4	43.7	45.5	13	60,109	2,943	55,789
8	01	.89	124,637	50.0	44.9	46.8	14	61,745	3,023	57,245
8	01	.86	122,366	64.2	60.1	62.7	18	82,646	4,054	75,220
8	01	.85	121,818	67.8	60.1	62.7	19	82,662	4,055	75,231
8	01	.84	121,269	71.4	62.4	65.6	20	85,871	4,240	77,929
8	01	.83	120,754	78.5	78.5	79.9	22	107,937	5,166	96,244
8	01	.82	120,458	85.7	83.4	84.0	24	114,702	5,431	101,791
8	01	.77	119,320	89.2	91.4	92.3	25	125,719	5,965	110,274
8	01	.75	119,085	92.8	91.5	92.4	26	125,875	5,969	110,391
8	01	.73	118,853	96.4	95.8	96.6	27	131,742	6,242	114,674
8	01	.71	118,739	100.0	100.0	100.0	28	137,467	6,458	118,739
		SUBTOTAL	19							
8	02	1.13	90,734	3.7	10.2	9.0	1	8,220	136	9,289
8	02	1.11	89,292	7.4	12.2	10.5	2	9,822	158	11,066
8	02	1.10	88,588	11.1	14.1	13.3	3	11,363	200	12,761
8	02	1.09	87,898	14.8	23.1	18.5	4	18,622	278	20,674
8	02	1.06	86,048	22.2	28.1	20.7	6	22,597	311	24,887
8	02	1.04	84,894	25.9	30.2	23.4	7	24,313	352	26,672
8	02	1.00	82,655	33.3	38.0	28.9	9	30,520	434	32,879
8	02	.99	82,157	37.0	43.3	33.5	10	34,836	503	37,152
8	02	.98	81,703	40.7	51.9	37.8	11	41,676	568	43,855
8	02	.95	80,544	48.1	56.8	50.1	13	45,636	752	47,617
8	02	.93	79,851	51.8	58.2	51.3	14	46,742	770	48,645
8	02	.92	79,515	55.5	59.9	55.7	15	49,145	835	49,936
8	02	.91	79,194	62.9	63.5	63.6	17	51,024	954	52,555
8	02	.90	78,901	66.6	69.8	66.6	18	56,070	999	57,098
8	02	.89	78,659	70.3	71.3	68.6	19	57,256	1,029	58,159
8	02	.88	78,428	74.0	74.7	76.3	20	60,059	1,145	60,620
8	02	.87	78,226	85.1	90.4	82.4	23	72,620	1,236	71,549
8	02	.86	78,149	88.8	97.0	93.3	24	77,891	1,400	76,081

AD	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
8	02	.85	78,125	92.5	97.9	95.0	25	78,688	1,425	76,759
8	02	.81	78,061	96.2	98.7	96.3	26	79,262	1,444	77,223
8	02	.79	78,040	100.0	100.0	100.0	27	80,296	1,499	78,040
		SUBTOTAL	21							
8	11	1.08	556,202	2.0	1.4	1.4	1	7,251	349	7,831
8	11	1.06	546,047	4.1	1.4	1.4	2	7,416	354	8,005
8	11	1.02	525,743	12.5	4.1	3.8	6	21,212	942	22,077
8	11	1.01	520,805	20.8	14.2	13.5	10	73,524	3,323	74,913
8	11	1.00	516,391	41.6	33.0	31.4	20	170,084	7,720	171,473
8	11	.99	512,941	56.2	54.1	53.6	27	278,837	13,143	279,138
8	11	.98	510,580	58.3	58.5	58.1	28	301,673	14,262	301,517
8	11	.97	508,446	60.4	58.6	58.2	29	301,927	14,275	301,764
8	11	.94	502,054	62.5	59.5	58.8	30	306,677	14,424	306,223
8	11	.93	499,971	64.5	61.2	60.6	31	315,185	14,867	314,142
8	11	.92	497,973	72.9	70.5	69.6	35	363,390	17,074	359,490
8	11	.90	494,941	77.0	79.9	79.1	37	411,552	19,391	401,836
8	11	.87	491,837	81.2	82.8	81.8	39	426,567	20,067	414,899
8	11	.86	490,953	85.4	85.5	84.9	41	440,794	20,832	427,134
8	11	.85	490,211	91.6	96.2	97.0	44	495,739	23,784	473,837
8	11	.84	490,018	93.7	96.4	97.1	45	496,476	23,814	474,455
8	11	.81	489,462	95.8	98.4	98.8	46	507,120	24,227	483,078
8	11	.76	489,068	97.9	98.7	99.0	47	508,370	24,285	484,024
8	11	.71	488,736	100.0	100.0	100.0	48	515,002	24,513	488,736
		SUBTOTAL	19							
8	18	.97	46,737	15.3	16.0	15.1	2	7,734	174	7,531
8	18	.94	45,524	23.0	18.7	21.9	3	9,041	251	8,733
8	18	.92	44,741	38.4	44.9	45.9	5	21,658	527	20,338
8	18	.91	44,475	46.1	46.7	49.5	6	22,511	568	21,114
8	18	.90	44,219	61.5	61.4	66.4	8	29,618	761	27,513
8	18	.89	44,033	76.9	78.5	87.3	10	37,840	1,001	34,823
8	18	.88	43,930	84.6	92.9	91.8	11	44,782	1,053	40,937
8	18	.87	43,896	92.3	93.7	93.2	12	45,192	1,069	41,293
8	18	.75	43,537	100.0	100.0	100.0	13	48,183	1,146	43,537
		SUBTOTAL	9							
8	20	1.10	96,961	9.0	1.9	1.3	1	1,626	26	1,788
8	20	1.09	96,090	18.1	37.3	40.4	2	32,929	792	35,938
8	20	1.04	93,335	27.2	38.3	41.0	3	33,767	803	36,780
8	20	1.03	92,791	45.4	48.7	55.2	5	42,944	1,080	46,232
8	20	1.00	91,435	54.5	65.9	76.9	6	58,149	1,506	61,437
8	20	.97	90,535	63.6	69.5	83.1	7	61,350	1,627	64,542
8	20	.89	88,392	72.7	76.3	87.3	8	69,066	1,708	71,403

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

AY	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
8	20	.88	88,201	81.8	80.5	88.5	9	70,976	1,733	73,033
8	20	.87	88,029	90.9	85.1	92.2	10	75,086	1,805	76,665
8	20	.76	86,592	100.0	100.0	100.0	11	88,147	1,956	86,592
		SUBTOTAL	10							
9	01	1.02	315,514	1.3	1.5	2.0	1	4,861	314	4,958
9	01	1.00	309,425	2.7	1.6	2.0	2	5,211	321	5,308
9	01	.99	306,384	5.5	3.5	4.3	4	11,045	685	11,083
9	01	.98	303,401	6.9	4.7	5.6	5	14,780	879	14,744
9	01	.97	300,455	11.1	9.8	12.3	8	30,521	1,937	30,012
9	01	.96	297,667	13.8	10.8	13.7	10	33,699	2,164	33,063
9	01	.95	294,911	15.2	12.0	14.9	11	37,150	2,348	36,342
9	01	.93	289,467	16.6	13.6	16.8	12	42,235	2,637	41,071
9	01	.92	286,796	19.4	15.9	19.4	14	49,464	3,045	47,722
9	01	.91	284,198	22.2	17.0	20.4	16	52,618	3,209	50,592
9	01	.90	281,631	31.9	24.0	27.4	23	74,392	4,313	70,188
9	01	.89	279,201	34.7	26.0	29.4	25	80,601	4,627	75,714
9	01	.88	276,994	38.8	28.7	31.5	28	88,813	4,947	82,941
9	01	.87	274,789	45.8	36.6	39.1	33	113,427	6,138	104,355
9	01	.86	272,830	52.7	52.4	55.2	38	162,129	8,664	146,239
9	01	.85	271,358	58.3	59.1	61.1	42	183,110	9,592	164,073
9	01	.83	268,834	62.5	66.7	67.2	45	206,563	10,550	183,513
9	01	.81	266,778	69.4	77.1	76.6	50	238,625	12,033	201,509
9	01	.80	266,071	70.8	78.1	77.5	51	241,795	12,179	212,045
9	01	.79	265,396	75.0	80.8	79.8	54	249,966	12,532	218,533
9	01	.78	264,802	79.1	83.7	82.8	57	258,963	13,008	225,518
9	01	.77	264,299	80.5	84.6	83.6	58	261,874	13,132	227,753
9	01	.76	263,824	83.3	87.3	86.7	60	270,099	13,622	234,010
9	01	.75	263,432	86.1	90.3	89.6	62	279,355	14,078	240,952
9	01	.74	263,132	87.5	92.2	92.0	63	285,454	14,444	245,465
9	01	.73	262,893	88.8	92.8	92.4	64	287,166	14,507	246,715
9	01	.70	262,228	91.6	94.3	94.2	66	291,953	14,791	250,055
9	01	.68	261,881	93.0	94.9	94.6	67	293,699	14,855	251,253
9	01	.66	261,568	95.8	95.1	94.9	69	294,382	14,898	251,704
9	01	.65	261,419	97.2	96.2	95.8	70	297,802	15,049	253,927
9	01	.64	261,304	98.6	96.3	95.9	71	298,131	15,366	254,138
9	01	.60	260,856	100.0	100.0	100.0	72	309,328	15,695	260,856
		SUBTOTAL	32							
9	02	1.04	277,959	1.8	1.6	1.4	1	4,455	95	4,633
9	02	1.03	275,340	5.4	4.3	4.0	3	11,700	255	12,095
9	02	1.02	272,785	9.0	5.0	4.9	5	13,499	315	13,930
9	02	1.01	270,247	14.5	6.8	7.6	8	18,263	488	18,742
9	02	1.00	267,757	18.1	9.8	15.5	10	26,349	984	26,828
9	02	.99	265,347	21.8	12.7	18.4	12	34,114	1,173	34,515
9	02	.98	263,016	23.6	13.3	19.0	13	35,652	1,211	36,022

RVS BASED FEE SCHEDULE SIMULATION
AREA-SPECIALTY SPECIFIC

A9	SPC	SCHEDULE AMOUNT	TOTAL COST	PERCENT OF PHYSICIANS ABOVE SCHEDULE	PERCENT OF RVS UNITS ABOVE SCHEDULE	PERCENT OF SERVICES ABOVE SCHEDULE	CUMULATIVE NUMBER OF PHYSICIANS	CUMULATIVE NUMBER OF RVS UNITS	CUMULATIVE NUMBER OF SERVICES	CUMULATIVE COST OF SERVICES
9	02	.97	260,699	29.0	15.7	20.6	16	42,083	1,307	42,260
9	02	.96	258,448	32.7	22.7	23.5	18	60,836	1,491	60,263
9	02	.95	256,383	38.1	25.8	30.0	21	69,000	1,904	68,019
9	02	.94	254,400	40.0	26.9	31.4	22	71,979	1,993	70,817
9	02	.93	252,447	41.8	27.9	31.5	23	74,604	2,002	73,261
9	02	.91	248,594	45.4	33.5	33.7	25	89,661	2,141	86,962
9	02	.90	246,818	49.0	40.2	35.7	27	107,487	2,270	103,036
9	02	.89	245,220	52.7	45.5	38.4	29	121,807	2,442	115,751
9	02	.88	243,765	54.5	46.6	38.9	30	124,640	2,473	118,244
9	02	.86	240,912	61.8	53.3	45.7	34	142,465	2,904	133,573
9	02	.85	239,664	67.2	67.9	65.4	37	181,593	4,152	166,832
9	02	.84	238,837	70.9	75.6	76.9	39	202,285	4,882	184,213
9	02	.83	238,157	72.7	79.3	77.9	40	212,001	4,943	192,277
9	02	.82	237,605	78.1	81.6	79.7	43	218,120	5,057	197,295
9	02	.81	237,113	80.0	83.5	82.1	44	223,213	5,210	201,420
9	02	.80	236,672	81.8	84.8	83.8	45	226,751	5,320	204,251
9	02	.79	236,267	87.2	90.0	88.2	48	240,587	5,596	215,181
9	02	.76	235,466	89.0	90.8	89.1	49	242,901	5,655	216,940
9	02	.73	234,735	92.7	93.3	92.0	51	249,617	5,838	221,843
9	02	.72	234,558	94.5	96.9	97.4	52	259,115	6,180	228,681
9	02	.68	234,232	96.3	97.2	98.3	53	260,059	6,238	229,323
9	02	.66	234,088	98.1	99.9	99.9	54	267,246	6,341	234,065
9	02	.63	234,087	100.0	100.0	100.0	55	267,278	6,343	234,087
		SUBTOTAL	30							
9	11	1.03	751,333	1.6	.1	.1	1	796	52	819
9	11	1.02	744,046	6.5	2.7	3.2	4	20,222	1,035	20,634
9	11	1.01	736,954	8.1	3.7	4.1	5	27,384	1,324	27,853
9	11	1.00	729,934	13.1	7.0	7.7	8	51,391	2,470	51,875
9	11	.99	723,153	16.3	7.4	8.2	10	54,490	2,640	54,963
9	11	.98	716,403	22.9	12.4	13.4	14	91,036	4,306	90,758
9	11	.96	703,635	27.8	15.6	16.3	17	114,063	5,254	112,864
9	11	.95	697,481	31.1	19.8	19.8	19	145,032	6,362	142,284
9	11	.94	691,637	32.7	20.5	20.4	20	149,759	6,555	146,727
9	11	.93	685,840	39.3	29.4	28.6	24	214,784	9,191	207,201
9	11	.92	683,693	44.2	33.2	31.9	27	242,861	10,243	233,032
9	11	.91	675,828	49.1	35.6	34.3	30	260,065	11,012	248,687
9	11	.90	671,134	52.4	36.3	34.9	32	265,005	11,187	253,133
9	11	.89	666,489	54.0	37.3	36.0	33	272,352	11,549	259,672
9	11	.88	661,918	57.3	43.2	42.3	35	315,668	13,568	297,790
9	11	.87	657,780	65.5	52.5	52.7	40	383,681	16,911	356,961
9	11	.86	654,323	70.4	66.0	67.2	43	481,465	21,563	441,056
9	11	.83	646,883	75.4	70.8	71.6	46	516,956	22,964	470,513
9	11	.82	644,758	78.6	72.4	73.1	48	528,782	23,429	480,211
9	11	.81	642,752	86.8	85.3	85.4	53	622,875	27,375	556,426
9	11	.80	641,686	88.5	87.1	87.1	54	635,702	27,929	566,687
9	11	.79	640,748	90.1	89.3	88.3	55	644,346	28,314	573,516
9	11	.78	639,897	93.4	95.2	95.5	57	694,562	30,614	612,645

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                                   RVS BASED FEE SCHEDULE SIMULATION
                                        AREA-SPECIALTY SPECIFIC

                                   PERCENT OF      PERCENT OF      PERCENT OF    CUMULATIVE   CUMULATIVE   CUMULATIVE   CUMULATIVE
          SCHEDULE    TOTAL        PHYSICIANS      RVS UNITS       SERVICES      NUMBER OF    NUMBER OF    NUMBER OF     COST OF
A9 SPC     AMOUNT     COST       ABOVE SCHEDULE  ABOVE SCHEDULE  ABOVE SCHEDULE PHYSICIANS    RVS UNITS    SERVICES     SERVICES

 9  11      .74      638,502         95.0            96.3            96.5           58        702,551      30,935       618,597
 9  11      .71      637,695         98.3            99.3            99.5           60        724,748      31,898       634,356
 9  11      .66      637,460        100.0           100.0           100.0           61        729,450      32,344       637,463
                \
           SUBTOTAL       26


 9  18      .99       91,463          6.6             2.7             2.4            1          2,562          35         2,536
 9  18      .97       89,666         13.3            19.5            13.2            2         18,084         187        17,592
 9  18      .90       84,465         20.0            24.2            14.9            3         22,447         211        21,519
 9  18      .86       81,667         26.6            28.5            22.0            4         26,335         312        24,863
 9  18      .85       81,007         33.3            28.5            22.2            5         26,371         315        24,893
 9  18      .83       79,686         53.3            45.9            40.9            8         42,406         580        38,232
 9  18      .81       78,687         60.0            50.6            45.1            9         46,828         640        41,784
 9  18      .80       78,231         66.6            64.4            51.1           10         59,530         724        51,946
 9  18      .79       77,903         80.0            73.7            71.7           12         68,172       1,016        58,773
 9  18      .78       77,661         86.6            81.4            82.8           13         75,225       1,173        64,274
 9  18      .77       77,489         93.3            90.9            93.0           14         83,982       1,318        71,017
 9  18      .73       77,153        100.0           100.0           100.0           15         92,387       1,416        77,153

           SUBTOTAL       12


 9  20     1.08      318,011          4.5             4.6             7.5            1         13,570         365        14,655
 9  20     1.05      309,584          9.0             8.1            10.8            2         24,072         524        25,632
 9  20     1.02      301,473         13.6            13.9            18.3            3         40,998         884        42,947
 9  20      .99      293,869         22.7            22.9            30.9            5         67,717       1,491        69,399
 9  20      .98      291,602         31.8            24.2            31.9            7         71,313       1,542        72,923
 9  20      .97      289,370         36.3            25.4            33.9            8         74,987       1,635        76,485
 9  20      .93      280,592         45.4            33.7            43.3           10         99,267       2,091        99,067
 9  20      .92      278,640         59.0            58.4            62.1           13        172,162       2,998       166,133
 9  20      .91      277,417         68.1            63.8            69.3           15        187,978       3,345       180,523
 9  20      .86      272,093         81.8            72.0            76.3           18        212,177       3,680       201,334
 9  20      .85      271,270         86.3            72.4            76.9           19        213,366       3,711       202,345
 9  20      .84      270,459         90.9            90.5            90.6           20        266,709       4,169       247,153
 9  20      .80      269,349         95.4            90.8            91.8           21        267,579       4,425       247,843
 9  20      .79     ,269,081        100.0           100.0           100.0           22        294,455       4,820       269,081

           SUBTOTAL       14


     672   RECORDS PRINTED
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Section II

Distributional Impacts of Fee Schedules

Note: In the counts of physicians in these tables, the single specialty groups are counted as one physician.

Four sets of tables are presented containing the following comparisons:

Set 1 : 1978 CPR System versus 1979 Fee Schedules

Set 2: 1979 " " " 1979 " "

Set 3: 1978 " " " 1980 " "

Set 4: 1980 " " " 1980 " "

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	8.8	7.8			76.8	78.4
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	4.8	13.2			57.4	52.8
INTERNISTS	494	5,384,259	3,800,192	1,458,571	6.4	10.1			66.6	60.1
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	7.6	6.2			67.2	79.8
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	1.8	17.2			29.5	34.8
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.4	10.3			64.1	64.5

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	10.1	6.7	16.6	15.3	83.3	84.6
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	4.7	14.1	31.8	36.8	68.1	63.1
INTERNISTS	494	5,384,259	3,808,192	1,458,571	6.9	9.8	26.8	33.6	73.1	66.3
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	8.3	5.5	16.5	12.6	83.4	87.3
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	-3.0	23.7	59.8	53.7	40.1	46.2
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.4	10.7	27.3	27.9	72.6	72.0

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
SPECIALTY										
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	6.3	10.2			61.4	63.0
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	6.2	11.8			68.1	63.1
INTERNISTS	494	5,384,259	3,808,192	1,458,571	6.6	9.9			66.6	60.1
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	6.1	8.2			59.0	72.3
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	6.2	10.8			71.6	74.2
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.4	10.1			65.3	63.8

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	6.3	10.5	27.5	25.6	72.4	74.3
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	6.2	12.4	26.0	31.1	73.9	68.8
INTERNISTS	494	5,384,259	3,808,192	1,458,571	6.5	10.1	26.8	33.6	73.1	66.3
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	6.1	8.1	32.7	20.1	67.2	79.8
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	6.2	11.0	22.0	18.1	77.9	81.8
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.4	10.4	27.0	28.0	72.9	71.9

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	30,943,031	2,124,279	766,166	8.9	7.8			75.6	77.2
GENERAL SURGEONS	331	15,896,065	1,147,878	424,543	4.6	13.2			56.2	52.8
INTERNISTS	494	53,842,059	3,808,192	1,458,571	6.5	10.0			65.8	59.3
OPHTHALMOLOGISTS	134	12,440,075	868,226	299,309	7.5	6.2			67.9	81.3
ORTHOPEDIC SURGEONS	132	13,061,092	1,018,522	342,664	1.7	17.5			25.0	34.0
ALL SPECIALTIES	1657	126,190,022	8,967,098	3,291,255	6.4	10.3			63.0	63.9

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	9.8	6.9	19.5	17.4	80.4	82.5
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	4.0	14.5	33.0	39.5	66.9	60.4
INTERNISTS	494	5,384,259	3,808,192	1,458,571	7.2	9.4	22.0	31.1	77.9	68.8
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	8.1	5.2	29.3	15.6	70.6	84.3
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	-2.9	23.8	64.5	59.0	35.4	40.9
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.4	10.6	27.9	29.1	72.0	70.8

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	6.2	10.4			59.8	61.8
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	6.2	11.4			73.0	66.1
INTERNISTS	494	5,384,259	3,808,192	1,458,571	6.7	9.7			72.1	64.7
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	6.2	8.9			75.3	74.6
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	5.8	13.6			78.2	78.0
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.4	10.4			70.1	65.9

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	6.3	10.7	30.4	27.5	69.5	72.4
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	6.2	11.9	24.0	29.6	74.9	69.1
INTERNISTS	494	5,384,259	3,808,192	1,458,571	6.6	9.9	21.2	29.9	78.7	70.0
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	6.1	8.8	21.8	20.8	78.1	79.1
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	5.4	13.7	22.9	20.4	77.0	79.5
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	6.3	10.6	24.0	27.5	75.7	72.1

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	18.3	13.5			98.1	98.2
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	12.7	20.7			92.3	89.4
INTERNISTS	494	5,384,259	3,808,192	1,458,571	14.9	16.6			97.4	92.9
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	16.5	12.0			93.2	96.2
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	6.7	27.9			72.4	76.5
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	14.6	17.1			93.9	92.3

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1976 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	18.7	13.0	1.8	1.7	98.1	98.2
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	12.8	20.9	7.6	10.5	92.3	89.4
INTERNISTS	494	5,384,259	3,800,192	1,458,571	15.2	16.2	2.5	7.0	97.4	92.9
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	16.8	11.6	6.7	3.7	93.2	96.2
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	4.5	31.1	27.5	23.4	72.4	76.5
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	14.6	17.2	6.0	7.0	93.9	92.9

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	14.5	17.2			93.9	94.3
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	14.4	18.9			95.0	93.3
INTERNISTS	494	5,384,259	3,808,192	1,458,571	14.9	16.5			97.4	92.9
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	14.3	14.6			88.8	93.2
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	14.4	17.3			90.9	93.1
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	14.6	16.9			94.7	93.5

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	14.5	17.2	6.0	5.6	93.9	94.3
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	14.4	19.1	4.9	6.6	95.0	93.3
INTERNISTS	494	5,384,259	3,808,192	1,458,571	14.9	16.6	2.5	7.0	97.4	92.9
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	14.3	14.5	11.1	6.7	88.8	93.2
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	14.4	17.5	8.7	6.0	91.2	93.9
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	14.6	16.9	5.2	6.3	94.7	93.6

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	30,943,031	2,124,279	766,166	18.1	13.5			98.0	97.5
GENERAL SURGEONS	331	15,890,065	1,147,878	424,543	12.1	21.2			92.1	88.8
INTERNISTS	494	53,842,059	3,808,192	1,458,571	15.3	16.1			97.8	93.1
OPHTHALMOLOGISTS	134	12,445,075	860,226	299,309	16.2	11.7			100.0	100.0
ORTHOPEDIC SURGEONS	132	13,061,092	1,010,522	342,664	6.3	28.5			74.3	78.7
ALL SPECIALTIES	1657	126,190,022	8,967,098	3,291,255	14.6	17.0			94.9	93.1

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	30,943,031	2,124,279	766,166	18.3	13.3	.7	1.5	99.2	98.4
GENERAL SURGEONS	331	15,890,065	1,147,878	424,543	12.1	21.3	6.7	9.9	93.2	90.0
INTERNISTS	494	53,842,059	3,808,192	1,458,571	15.6	15.8	1.4	5.8	98.5	94.1
OPHTHALMOLOGISTS	134	12,445,075	868,226	299,309	16.5	11.3			100.0	100.0
ORTHOPEDIC SURGEONS	132	13,061,092	1,018,522	342,664	4.5	31.2	24.2	20.4	75.7	79.5
ALL SPECIALTIES	1657	126,190,022	8,967,098	3,291,255	14.6	17.1	4.1	5.9	95.8	94.0

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1978 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	14.2	17.5			94.5	94.1
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	14.4	18.5			96.5	93.6
INTERNISTS	494	5,384,259	3,808,192	1,458,571	14.9	16.3			97.7	92.3
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	14.3	15.2			98.2	97.7
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	13.2	20.9			97.3	96.2
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	14.4	17.2			96.8	93.9

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1976 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,124,279	766,166	14.5	17.3	4.9	5.3	95.0	94.6
GENERAL SURGEONS	331	1,589,665	1,147,878	424,543	14.4	18.5	3.4	6.3	96.5	93.6
INTERNISTS	494	5,384,259	3,808,192	1,458,571	14.9	16.4	2.2	7.6	97.7	92.3
OPHTHALMOLOGISTS	134	1,244,575	868,226	299,309	14.3	15.2	1.7	2.2	98.2	97.7
ORTHOPEDIC SURGEONS	132	1,306,192	1,018,522	342,664	14.4	19.5	2.6	3.7	97.3	96.2
ALL SPECIALTIES	1657	12,619,022	8,967,098	3,291,255	14.6	17.1	3.0	5.8	96.9	94.1

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319		1.2	53.7	52.4	46.2	47.5
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251		1.4	54.6	56.4	45.3	43.5
INTERNISTS	494	5,384,259	4,059,647	1,605,198		.1	51.8	58.0	48.1	41.9
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146		-.9	52.1	41.0	47.8	58.9
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304		-.9	43.1	40.9	56.8	59.0
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.3	51.7	53.1	48.2	46.8

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319	2.4	-1.2	48.3	46.8	51.6	53.1
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251	-1.5	2.1	71.6	70.9	28.3	29.0
INTERNISTS	494	5,384,259	4,059,647	1,605,198			62.9	64.9	37.0	35.0
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146	1.2	-2.7	52.6	38.8	47.3	61.1
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304	-4.2	4.8	86.5	82.5	13.4	17.4
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.2	61.8	59.2	38.1	40.7

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,250,273	837,319	3.3	-2.0	44.0	41.5	55.9	58.4
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251	-1.9	3.2	66.3	64.3	33.6	35.6
INTERNISTS	494	5,384,255	4,059,647	1,605,198	.6	-.5	53.7	58.0	46.2	41.9
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146	1.8	-3.6	47.8	33.5	52.1	66.4
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304	-8.6	10.4	83.8	78.7	16.1	21.2
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.4	55.4	53.3	44.5	46.6

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319		1.1	63.3	61.6	36.6	38.3
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251		.5	62.5	61.9	37.4	38.0
INTERNISTS	494	5,384,259	4,059,647	1,605,198	.1	-.2	62.7	63.5	37.2	36.4
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146		-.2	63.7	58.2	36.2	41.7
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304	-.4	1.3	60.0	56.8	39.9	43.1
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.3	62.7	61.6	37.2	38.3

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319		1.3	56.6	54.4	43.3	45.5
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251		.9	56.5	55.8	42.3	43.2
INTERNISTS	494	5,384,259	4,059,647	1,605,198			58.6	61.5	41.3	38.4
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146		-.3	58.9	52.2	41.0	47.7
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304	-.7	1.4	57.0	52.2	42.9	47.7
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.5	57.7	56.4	42.0	43.3

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319		.9	62.9	61.6	37.0	38.3
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251		.8	64.8	64.6	35.1	35.3
INTERNISTS	494	5,384,259	4,059,647	1,605,198			61.8	64.9	38.1	35.0
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146		-.9	58.1	49.2	41.8	50.7
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304		-1.1	54.5	51.5	45.4	48.4
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220			61.3	61.4	38.6	38.5

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319	2.3	-1.2	50.3	48.9	49.6	51.0
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251	-1.2	2.0	72.3	71.9	27.6	28.0
INTERNISTS	494	5,384,259	4,059,647	1,605,198	-.1		63.2	65.9	36.7	34.0
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146	1.3	-2.7	54.6	44.7	45.3	55.2
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304	-4.1	4.5	87.6	84.0	12.3	15.9
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.2	62.9	61.0	37.0	38.9

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1979 WITH FEE SCHEDULE IN 1979
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,258,273	837,319	3.5	-2.2	41.7	39.3	58.2	60.5
GENERAL SURGEONS	331	1,589,665	1,219,173	471,251	-1.4	2.9	64.8	64.6	35.1	35.3
INTERNISTS	494	5,384,259	4,059,647	1,605,198	.2	-.1	51.8	58.0	48.1	41.9
OPHTHALMOLOGISTS	134	1,244,575	921,963	327,146	2.0	-3.4	45.8	33.5	54.1	66.4
ORTHOPEDIC SURGEONS	132	1,306,192	1,082,312	384,304	-8.7	10.3	82.9	78.7	17.0	21.2
ALL SPECIALTIES	1657	12,619,022	9,541,370	3,625,220		.5	53.6	52.6	46.3	47.3

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,124	3.2	-10.9	42.7	40.6	57.2	59.3
GENERAL SURGEONS	331	1,589,665	1,313,588	548,499	-1.4	-6.3	67.1	66.7	32.8	33.2
INTERNISTS	494	5,384,259	4,377,483	1,578,885		7.7	56.6	61.5	43.3	38.4
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,654	1.8	1.2	46.6	34.3	53.3	65.5
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,885	404,478	-6.7	8.4	83.6	80.3	16.3	19.5
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,841,642		.5	56.3	54.7	43.6	45.2

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,257	3.6	-11.2	35.9	34.4	64.0	65.5
GENERAL SURGEONS	331	1,589,665	1,313,588	548,812	-1.3	-6.2	61.2	62.5	38.7	37.4
INTERNISTS	494	5,384,259	4,377,483	1,578,692	.2	7.5	49.8	55.2	50.1	44.7
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,849	2.1	.7	44.4	30.5	55.5	69.4
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,885	404,787	-8.6	11.0	82.1	77.2	17.8	22.7
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,842,399		.5	50.6	49.3	49.3	50.5

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,124		-8.0	53.7	52.4	46.2	47.5
GENERAL SURGEONS	331	1,589,665	1,313,588	548,499		-7.7	54.6	56.4	45.3	43.5
INTERNISTS	494	5,384,259	4,377,483	1,578,885		7.7	56.6	61.5	43.3	38.4
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,654		3.5	52.1	41.0	47.8	58.9
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,885	404,478		-.5	47.5	45.4	52.4	54.5
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,841,642		.2	54.3	54.4	45.6	45.5

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
STATEWIDE FEE SCHEDULE - SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,257		-8.0	50.8	49.8	49.1	50.1
GENERAL SURGEONS	331	1,589,665	1,313,508	548,812		-7.6	54.6	56.4	45.3	43.5
INTERNISTS	494	5,384,259	4,377,483	1,578,692		7.8	56.6	61.5	43.3	38.4
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,849		3.4	52.1	41.0	47.8	58.9
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,885	404,787		-.4	43.1	40.9	56.8	59.0
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,842,399		.3	53.1	53.2	46.8	46.7

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,124	3.1	-10.8	44.2	41.8	55.7	58.1
GENERAL SURGEONS	331	1,589,665	1,313,588	540,499	-1.9	-6.0	67.4	66.1	32.5	33.8
INTERNISTS	494	5,384,259	4,377,483	1,578,085	.3	7.3	58.4	60.5	41.5	39.4
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,654	1.6	.9	48.3	34.3	51.6	65.6
ORTHOPEDIC SURGEONS	132	1,300,192	1,165,385	404,478	-7.1	8.9	85.8	81.0	14.1	18.9
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,841,642		.4	57.9	54.7	42.0	45.2

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - NO SPECIALTY DISTINCTION - WITHOUT HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,257	3.3	-11.0	44.2	41.6	55.7	58.3
GENERAL SURGEONS	331	1,589,665	1,313,588	548,812	-1.9	-5.9	66.3	64.3	33.6	35.6
INTERNISTS	494	5,384,259	4,377,483	1,578,692	.6	7.1	55.9	59.3	44.0	40.6
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,849	1.9	.5	47.8	33.5	52.1	66.4
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,385	404,787	-8.6	11.1	83.8	78.7	16.1	21.2
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,842,399		.4	56.4	53.7	43.5	46.2

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - SPECIALTY DISTINCTION - WITH HOLD HARMLESS
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,124	-.2	-7.7	60.1	57.5	39.8	42.4
GENERAL SURGEONS	331	1,589,665	1,313,588	548,499		-8.1	56.8	56.7	43.1	43.2
INTERNISTS	494	5,384,259	4,377,483	1,578,885		7.5	57.3	60.5	42.6	39.4
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,654		4.0	58.4	51.4	41.5	48.5
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,885	404,478	-1.0	2.5	59.3	56.0	40.6	43.9
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,841,642	-.1	.5	58.2	57.6	41.7	42.3

TABLE TYPE A

COMPARISON OF CPR SYSTEM IN 1980 WITH FEE SCHEDULE IN 1980
AREA FEE SCHEDULE - SPECIALTY DISTINCTION
ALL MAJOR PROCEDURES
MEDICARE TOTAL CLAIMS

SPECIALTY	NUMBER OF PHYSICIANS	NUMBER OF SERVICES	BASE PROGRAM EXPEND.	BASE BENE. EXPEND.	% CHANGE PROGRAM EXPEND.	% CHANGE BENE. EXPEND.	% OF SERVICES WITH PRICE DECREASE	% OF PHYSICIANS WITH PRICE DECREASE	% OF SERVICES WITH PRICE INCREASE	% OF PHYSICIANS WITH PRICE INCREASE
GENERAL PRACTITIONERS	566	3,094,331	2,433,698	978,257		-7.9	56.6	54.2	43.3	45.5
GENERAL SURGEONS	331	1,589,665	1,313,580	548,812		-8.1	56.3	56.1	43.6	43.8
INTERNISTS	494	5,384,259	4,377,483	1,578,692		7.6	57.3	60.5	42.6	39.4
OPHTHALMOLOGISTS	134	1,244,575	993,240	331,849		4.0	57.8	50.7	42.1	49.2
ORTHOPEDIC SURGEONS	132	1,306,192	1,165,885	404,787		1.2	56.6	50.7	43.3	49.2
ALL SPECIALTIES	1657	12,619,022	10,283,895	3,842,399		.4	57.0	55.9	42.9	43.9

Procedure Based Schedules

The second type of fee schedule simulated under the grant was a procedure based schedule. These simulations were performed in year five. Two such schedules were simulated--statewide schedules with and without a hold-harmless provision. The system which excluded the hold-harmless will be discussed first.

Statewide Fee Schedules Without a Hold-Harmless Provision

Fee schedule values were calculated for each of roughly 470 procedures using 1980 customary and prevailing charge data for the entire state of California. This file included customary and prevailing charge data for every certified Medicare provider in the state. The fee schedule values were calculated as the 1980 average reasonable charge for each i^{th} procedure:

$$FS_i = \sum_j (AR_{ij} * NS_{ij}) \sum_j NS_{ij}$$

where the fee schedule (FS) is the weighted average of physician-specific average reasonable fees. $AR_{ij} = \min (LVI_{ij}, LVII_i)$ where LVI_{ij} is the level one or customary charge for each physician and procedure, and $LVII_i$ is the indexed prevailing for each procedure and PSRO. The weight is the number of services (NS) for each procedure i performed by each physician j in the state. The service count includes services provided to Medicare, Medicaid, CHAMPUS, and Blue Shield private business. Medicare includes all such services in setting its profiles. If Medicare services alone were used as the weight in calculating average reasonable fees, any program savings which would otherwise appear might be eliminated. The program savings which appear here as the result of implementing a fee schedule may reflect the substantial weight given to low priced Medicaid doctors when all claims are included in calculating fee schedule values.

The calculated fee schedule values were appended to a 1978 summary file of our California sample of solo and group practice physicians. The 1978 charge data for the sample providers had previously been adjusted to reflect 1978-1980 fee experience. The 1980 average billed amounts (ABA_{1980}) were estimated by inflating the physicians' 1978 billed charges. The inflation factor equalled the rate of increase in the physician's own median charge for the procedure between 1976 and 1978 times the average rate of increase in physician fees between 1978 and 1980. Or, in other words:

$$ABA_{1980} = \left[(LVI_{1980}/LVI_{1978})/ADJFEE_{76-78}\right] * ADJFEE_{78-80} * ABA_{1978}$$

where $ADJFEE_{76-78}$ and $ADJFEE_{78-80}$ represent the changes in the California physicians' fee index between 1976 and 1978, and 1978 and 1980, respectively. In those instances where either a 1978 or 1980 level one was missing, the 1978 ABA was simply multiplied by the $ADJFEE_{78-80}$. ADJFEE is calculated separately for each procedure type as shown in Table D below.

Table D

	$ADJFEE_{76-78}$	$ADJFEE_{78-80}$
Medical Services	1.1426	1.2014
Surgery	1.1346	1.1734
Radiology	1.1047	1.2122
Pathology	1.1044	1.1553

The effect of this inflation method is that if a physician's billed charge for a procedure increased 10 percent faster than average physician fees in 1976-1978, his estimated increase for 1978-80 is 10 percent greater than the average 1978-80 increase.

Average reimbursements per service under the statewide fee schedule were estimated for each physician/procedure/claim type as the minimum of the 1980 level one, 1980 level two, and 1980 average billed amount. The 1978 service counts, assignment behavior, etc., were assumed constant.

Physician revenues, program expenditures and patient libilities were then calculated under both the CPR and fee schedule systems as defined below.

Physician Revenue (PR) Under CPR System/Fee Schedule

1. Medicare Total

$$PR = (ABA_{NA_{1980}} * NS_{NA_{1978}}) + (AAA_{VA_{1980}}^{\left(\begin{smallmatrix}CPR\\ FS\end{smallmatrix}\right)} * NS_{VA_{1978}}) + (AAA_{MA_{1980}}^{\left(\begin{smallmatrix}CPR\\ FS\end{smallmatrix}\right)} * NS_{MA_{1978}})$$

2. Non-Assigned

$$PR = (ABA_{NA_{1980}} * NS_{NA_{1978}})$$

3. Voluntary Assigned

$$PR = (AAA_{VA_{1980}} * NS_{VA_{1978}})$$

4. Mandatory Assigned

$$PR = (AAA_{MA_{1980}} * NS_{MA_{1978}})$$

Program Expenditures (PE) Under CPR System/Fee Schedule

1. Medicare Total

$$PE = (AAA_{NA_{1980}} * NS_{NA_{1978}}) + (AAA_{VA_{1980}} * NS_{NA_{1978}}) + (AAA_{MA_{1980}} * NS_{MA_{1978}})$$

2. Non-Assigned

$$PE = (AAA_{NA_{1980}} * NS_{NA_{1978}})$$

3. Voluntary Assigned - same as PR

4. Mandatory Assigned - same as PR

Patient Liability (PL) Under CPR System/Fee Schedule

1. Medicare Total

$$PL = (ABA_{NA_{1980}} - .8\ (AAA_{NA_{1980}})) * NS_{NA_{1978}} + .2\ ((AAA_{VA_{1980}} * NS_{VA_{1978}}) + (AAA_{MA_{1980}} * NS_{MA_{1978}}))$$

2. Non-Assigned

$$PL = (ABA_{NA_{1980}} - .8\ (AAA_{NA_{1980}})) * NS_{NA_{1978}}$$

3. Voluntary Assigned

$$PL = .2\ (AAA_{VA_{1980}} * NS_{VA_{1978}})$$

4. Mandatory Assigned

$$PL = .2\ (AAA_{MA_{1980}} * NS_{MA_{1978}})$$

The results of the simulations are presented in table sets 1 through 4. Table set 1 presents estimates of physician revenues, program expenditures, and patient liability under both the CPR system and statewide fee schedule. The results are presented by claim type for each of five specialties (general practice, general surgery, internal medicine, orthopedic surgery, ophthalmology). Physician revenue columns have been deleted from the mandatory and voluntary assigned tables, since for assigned claims, physician revenues and program expenditures are equal.

Table set 2 presents the distribution of physicians according to the percentage change in program revenues resulting from the implementation of a statewide fee schedule. Table set 3 displays the weighted distribution of physicians by the percentage change in program expenditures resulting from imposition of a fee schedule using number of services as the weight. Similarly, Table set 4 presents the distribution of patients according to the percentage change in patient liabilities brought about by the transition to a statewide fee schedule.

As seen in Table 1, implementation of the fee schedule is estimated to reduce program costs for those five specialties by approximately 2.3 percent, increase patient liability by approximately 2.5 percent, and cause a decline in physician revenues of less than 1 percent. However the impact of the statewide fee schedule is observed to have a variable effect upon different specialties, such that the major impact of its imposition is a distributional

TABLE 1
PHYSICIAN REVENUES, PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT MD REVENUE	FEE SCHEDULE MD REVENUE	PERCENT CHANGE REVENUE	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
TOTAL FIVE SPECIALTIES										
ALL PROCEDURES	3212	40016026	39707528	-0.77	33999187	33219524	-2.29	12816679	13131908	2.46
OFFICE VISITS	3112	12336699	12204570	-1.07	10474573	10058228	-3.97	3957040	4157987	5.08
HOSPITAL VISITS	2450	10623767	10559256	-0.61	9176865	9064335	-1.23	3282275	3307787	0.78
TOTAL MEDICINE	2329	25018236	24801783	-0.87	21468810	20917085	-2.57	7843187	8068114	2.87
SURGERY	2458	8873672	8858393	-0.17	7443935	7403019	-0.55	2918524	2935978	0.60
PATHOLOGY	1686	1769467	1736628	-1.86	1336401	1264932	-5.35	700347	724682	3.47
RADIOLOGY	1037	1395265	1381935	-0.96	1198859	1165185	-2.81	436178	449786	3.12
GENERAL PRACTICE										
ALL PROCEDURES	1129	8568352	8623920	0.65	7386882	7487004	1.36	2658846	2634316	-0.92
OFFICE VISITS	1091	4047442	4073201	0.64	3496723	3551077	1.55	1250064	1232339	-1.42
HOSPITAL VISITS	861	2244553	2274757	1.35	1956969	2011900	2.81	678978	665237	-2.02
TOTAL MEDICINE	1127	7255526	7322543	0.92	6310705	6432097	1.92	2206961	2176865	-1.36
SURGERY	839	442337	443947	0.36	366731	373157	1.75	148952	145421	-2.37
PATHOLOGY	956	488080	478795	-1.90	376346	357790	-4.93	187003	192563	2.97
RADIOLOGY	489	382442	378617	-1.00	333161	323971	-2.76	115913	119441	3.04
GENERAL SURGERY										
ALL PROCEDURES	625	4915400	4885333	-0.61	4199135	4141323	-1.38	1556091	1572274	1.04
OFFICE VISITS	606	810543	806780	-0.46	701738	694311	-1.06	249152	251331	0.87
HOSPITAL VISITS	510	615146	616874	0.28	543979	547418	0.63	179962	178939	-0.57
SURGERY	563	3032754	3011805	-0.69	2556488	2516094	-1.58	987563	998930	1.15

TABLE 1
PHYSICIAN REVENUES, PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT MD REVENUE	FEE SCHEDULE MD REVENUE	PERCENT CHANGE REVENUE	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
INTERNAL MEDICINE										
ALL PROCEDURES	965	18529072	18225152	-1.64	15637080	14915655	-4.61	6019413	6292629	4.54
OFFICE VISITS	929	6330629	6190603	-2.21	5294781	4876470	-7.90	2094803	2289427	9.29
HOSPITAL VISITS	873	7442135	7350554	-1.23	6394290	6235313	-2.49	2326703	2362343	1.53
TOTAL MEDICINE	964	16359679	16082069	-1.70	13922052	13260167	-4.75	5222037	5473935	4.82
SURGERY	603	327027	329375	0.72	281223	287661	2.29	102048	99246	-2.75
PATHOLOGY	730	1281387	1257833	-1.84	960056	907142	-5.51	513343	532120	3.66
RADIOLOGY	351	561142	555934	-0.93	473817	460614	-2.79	182088	187442	2.94
ORTHOPEDIC SURGERY										
ALL PROCEDURES	255	4185166	4162533	-0.54	3513870	3438522	-2.14	1374069	1411715	2.74
OFFICE VISITS	249	530399	516786	-2.57	451151	407836	-9.60	169478	190517	12.41
HOSPITAL VISITS	206	321933	317031	-1.52	281627	269705	-4.23	96632	101268	4.80
SURGERY	238	2662096	2665388	0.12	2217651	2217920	0.01	887976	891052	0.35
RADIOLOGY	197	451682	447383	-0.95	391881	380600	-2.88	138178	142903	3.42
OPHTHALMOLOGY										
ALL PROCEDURES	238	3818036	3810590	-0.20	3262220	3237020	-0.77	1208260	1220974	1.05
OFFICE VISITS	237	617686	617200	-0.08	530179	528534	-0.31	193543	194373	0.43
TOTAL MEDICINE	238	1403031	1397171	-0.42	1236053	1224821	-0.91	414189	417314	0.75
SURGERY	215	2409458	2407878	-0.07	2021842	2008187	-0.68	791984	801329	1.18

TABLE 1
PHYSICIAN REVENUES, PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT MD REVENUE	FEE SCHEDULE MD REVENUE	PERCENT CHANGE REVENUE	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
TOTAL FIVE SPECIALTIES										
ALL PROCEDURES	3010	25333875	25333875	0.00	19317031	18845869	-2.44	9880247	10257177	3.81
OFFICE VISITS	2929	8372294	8372294	0.00	6510167	6225951	-4.37	3164159	3391532	7.19
HOSPITAL VISITS	2014	5802327	5802327	0.00	4355425	4307407	-1.10	2317987	2356401	1.66
TOTAL MEDICINE	2184	15514186	15514186	0.00	11964759	11629488	-2.80	5942378	6210595	4.51
SURGERY	2087	5870217	5870217	0.00	4440480	4414843	-0.58	2317833	2338342	0.88
PATHOLOGY	1546	1266943	1266943	0.00	833877	795247	-4.63	599842	630745	5.15
RADIOLOGY	925	955515	955515	0.00	759108	738765	-2.68	348228	364503	4.67
GENERAL PRACTICE										
ALL PROCEDURES	1064	5008151	5008151	0.00	3826681	3871235	1.16	1946805	1911162	-1.83
OFFICE VISITS	1032	2468017	2468017	0.00	1917298	1945893	1.49	934179	911303	-2.45
HOSPITAL VISITS	700	1191591	1191591	0.00	904007	928735	2.74	468386	448604	-4.22
TOTAL MEDICINE	1060	4125628	4125628	0.00	3180807	3235182	1.71	1580982	1537482	-2.75
SURGERY	712	330344	330344	0.00	254738	259555	1.89	126554	122700	-3.04
PATHOLOGY	864	317771	317771	0.00	206037	196766	-4.50	152941	160358	4.85
RADIOLOGY	416	234396	234396	0.00	185116	179750	-2.90	86304	90597	4.97
GENERAL SURGERY										
ALL PROCEDURES	578	2945574	2945574	0.00	2229309	2201564	-1.24	1162126	1184322	1.91
OFFICE VISITS	559	472002	472002	0.00	363198	359533	-1.01	181444	184375	1.62
HOSPITAL VISITS	375	279831	279831	0.00	208664	210375	0.82	112900	111531	-1.21
SURGERY	466	1953992	1953992	0.00	1477726	1458281	-1.32	771811	787367	2.02

TABLE 1
PHYSICIAN REVENUES, PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT MD REVENUE	FEE SCHEDULE MD REVENUE	PERCENT CHANGE REVENUE	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
INTERNAL MEDICINE										
ALL PROCEDURES	898	11946837	11946837	0.00	9054839	8637338	-4.61	4702965	5036966	7.10
OFFICE VISITS	880	4631666	4631666	0.00	3595818	3317532	-7.74	1755011	1977640	12.69
HOSPITAL VISITS	770	4130859	4130859	0.00	3083014	3015578	-2.19	1664448	1718396	3.24
TOTAL MEDICINE	894	10368895	10368895	0.00	7931268	7546993	-4.85	4023880	4331300	7.64
SURGERY	509	224664	224664	0.00	178860	182950	2.29	81576	78304	-4.01
PATHOLOGY	682	949172	949172	0.00	627840	598481	-4.68	446900	470387	5.26
RADIOLOGY	331	404196	404196	0.00	316872	308876	-2.52	150699	157095	4.24
ORTHOPEDIC SURGERY										
ALL PROCEDURES	240	2822203	2822203	0.00	2150908	2098193	-2.45	1101476	1143649	3.83
OFFICE VISITS	231	374355	374355	0.00	295107	265405	-10.06	138269	162031	17.18
HOSPITAL VISITS	169	200046	200046	0.00	159739	152719	-4.39	72254	77871	7.77
SURGERY	211	1775145	1775145	0.00	1330700	1327677	-0.23	710585	713003	0.34
RADIOLOGY	178	316922	316922	0.00	257121	250139	-2.72	111226	116811	5.02
OPHTHALMOLOGY										
ALL PROCEDURES	230	2611110	2611110	0.00	2055294	2037539	-0.86	966875	981078	1.47
OFFICE VISITS	227	426254	426254	0.00	338747	337588	-0.34	155257	156184	0.60
TOTAL MEDICINE	230	1019663	1019663	0.00	852684	847313	-0.63	337516	341813	1.27
SURGERY	189	1586072	1586072	0.00	1198456	1186380	-1.01	627307	636967	1.54

TABLE 1
PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
TOTAL FIVE SPECIALTIES							
ALL PROCEDURES	2568	5445721	5250555	-3.58	1089144	1050111	-3.58
OFFICE VISITS	2227	989958	924690	-6.59	197992	184938	-6.59
HOSPITAL VISITS	1535	2070749	2016144	-2.64	414150	403229	-2.64
TOTAL MEDICINE	1871	3217942	3081222	-4.25	643588	616244	-4.25
SURGERY	1019	1440408	1412792	-1.92	288081	282558	-1.92
PATHOLOGY	834	172267	161497	-6.25	34453	32299	-6.25
RADIOLOGY	483	144799	139011	-4.00	28960	27802	-4.00
GENERAL PRACTICE							
ALL PROCEDURES	848	720598	728863	1.15	144120	145773	1.15
OFFICE VISITS	755	225878	227856	0.88	45176	45571	0.86
HOSPITAL VISITS	479	337972	346273	2.46	67594	69255	2.46
TOTAL MEDICINE	841	644273	653946	1.50	128855	130789	1.50
SURGERY	225	28842	29308	1.62	5768	5862	1.62
PATHOLOGY	420	26196	25028	-4.46	5239	5006	-4.46
RADIOLOGY	191	21290	20589	-3.29	4258	4118	-3.29
GENERAL SURGERY							
ALL PROCEDURES	483	883936	864958	-2.15	176787	172992	-2.15
OFFICE VISITS	384	109613	108117	-1.37	21923	21623	-1.37
HOSPITAL VISITS	280	143340	143995	0.46	28668	28799	0.46
SURGERY	328	549472	534517	-2.72	109894	106903	-2.72

TABLE 1
PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
INTERNAL MEDICINE							
ALL PROCEDURES	837	2728338	2572944	-5.70	545668	514589	-5.70
OFFICE VISITS	753	551896	491882	-10.87	110379	98376	-10.87
HOSPITAL VISITS	667	1536500	1475503	-3.97	307300	295101	-3.97
TOTAL MEDICINE	836	2468804	2325117	-5.82	493761	465024	-5.82
SURGERY	237	44272	45150	1.98	8854	9030	1.98
PATHOLOGY	414	146071	136469	-6.57	29214	27294	-6.57
RADIOLOGY	164	69251	66179	-4.44	13850	13236	-4.44
CRTHOPEDIC SURGERY							
ALL PROCEDURES	201	612084	594399	-2.89	122417	118880	-2.89
OFFICE VISITS	179	56741	50750	-10.56	11348	10150	-10.56
HOSPITAL VISITS	109	52938	50374	-4.84	10588	10075	-4.84
SURGERY	139	421994	416649	-1.27	84399	83330	-1.27
RADIOLOGY	128	54258	52242	-3.72	10852	10448	-3.72
OPHTHALMOLOGY							
ALL PROCEDURES	199	500765	489391	-2.27	100153	97878	-2.27
OFFICE VISITS	156	45831	46085	0.55	9166	9217	0.55
TOTAL MEDICINE	194	104865	102160	-2.58	20973	20432	-2.58
SURGERY	90	395828	387167	-2.19	79166	77433	-2.19

TABLE 1
PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
TOTAL FIVE SPECIALTIES							
ALL PROCEDURES	2874	9236435	9123097	-1.23	1847287	1824620	-1.23
OFFICE VISITS	2706	2974446	2907586	-2.25	594889	581517	-2.25
HOSPITAL VISITS	1848	2750690	2740784	-0.36	550138	548157	-0.36
TOTAL MEDICINE	2089	6286107	6206373	-1.27	1257222	1241275	-1.27
SURGERY	1544	1563046	1575384	0.79	312609	315077	0.79
PATHOLOGY	1266	330257	308188	-6.68	66051	61638	-6.68
RADIOLOGY	709	294952	287409	-2.56	58990	57482	-2.56
GENERAL PRACTICE							
ALL PROCEDURES	1016	2839603	2886906	1.67	567921	577381	1.67
OFFICE VISITS	970	1353547	1377327	1.76	270710	275466	1.76
HOSPITAL VISITS	655	714990	736893	3.06	142998	147379	3.06
TOTAL MEDICINE	1011	2485624	2542969	2.31	497125	508594	2.31
SURGERY	491	83151	84295	1.38	16630	16859	1.38
PATHOLOGY	729	144113	135996	-5.63	28823	27199	-5.63
RADIOLOGY	339	126756	123632	-2.46	25351	24726	-2.46
GENERAL SURGERY							
ALL PROCEDURES	552	1085890	1074801	-1.02	217178	214960	-1.02
OFFICE VISITS	502	228928	226661	-0.99	45786	45332	-0.99
HOSPITAL VISITS	337	191975	193048	0.56	38395	38610	0.56
SURGERY	397	529290	523296	-1.13	105858	104659	-1.13

TABLE 1
PROGRAM EXPENDITURES, AND PATIENT LIABILITY UNDER CPR SYSTEM AND STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE	TOTAL NO. MDS	CURRENT PROGRAM EXPENDITURE	FEE SCHEDULE EXPENDITURE	PERCENT CHANGE EXPENDITURE	CURRENT PATIENT LIABILITY	FEE SCHEDULE PATIENT LIABILITY	PERCENT CHANGE LIABILITY
INTERNAL MEDICINE							
ALL PROCEDURES	857	3853902	3705371	-3.85	770781	741074	-3.85
OFFICE VISITS	809	1147067	1067055	-6.98	229413	213411	-6.98
HOSPITAL VISITS	719	1774775	1744231	-1.72	354955	348846	-1.72
TOTAL MEDICINE	855	3521979	3388055	-3.80	704396	677611	-3.80
SURGERY	311	58090	59561	2.53	11618	11912	2.53
PATHOLOGY	537	186144	172192	-7.50	37229	34438	-7.50
RADIOLOGY	210	87694	85559	-2.43	17539	17112	-2.43
ORTHOPEDIC SURGERY							
ALL PROCEDURES	225	750878	745930	-0.66	150176	149186	-0.66
OFFICE VISITS	213	99303	91681	-7.68	19861	18336	-7.68
HOSPITAL VISITS	137	68950	66612	-3.39	13790	13322	-3.39
SURGERY	181	464957	473593	1.86	92991	94719	1.86
RADIOLOGY	160	80502	78219	-2.84	16100	15644	-2.84
OPHTHALMOLOGY							
ALL PROCEDURES	224	706161	710089	0.56	141232	142018	0.56
OFFICE VISITS	212	145601	144861	-0.51	29120	28972	-0.51
TOTAL MEDICINE	223	278504	275349	-1.13	55701	55070	-1.13
SURGERY	164	427558	434639	1.66	85512	86928	1.66

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	965	0.00	0.10	5.08	6.94	36.06	27.46	22.28	1.76	0.31	0.00	0.00	18886.17	-314.94
OFFICE VISITS	929	0.00	0.32	7.97	7.21	44.46	24.97	13.78	0.97	0.32	0.00	0.00	6663.73	-150.73
HOSPITAL VISITS	873	0.00	0.34	4.70	5.27	26.35	24.17	30.47	7.22	1.49	0.00	0.00	8419.92	-104.86
TOTAL MEDICINE	964	0.00	0.21	5.71	7.05	36.10	25.93	22.61	2.07	0.31	0.00	0.00	16682.64	-287.98
SURGERY	603	0.00	0.00	0.83	2.82	12.44	53.90	21.72	4.15	3.81	0.33	0.00	546.23	3.39
PATHOLOGY	730	0.00	0.14	4.11	6.58	30.14	43.56	12.74	1.51	1.23	0.00	0.00	1723.06	-32.27
RADIOLOGY	351	0.00	0.00	1.71	7.98	24.22	46.15	17.66	1.42	0.85	0.00	0.00	1583.86	-14.84
ORTHOPEDIC SURGERY														
ALL PROCEDURES	255	0.00	0.00	2.35	8.24	29.41	29.02	25.88	3.53	1.57	0.00	0.00	16323.66	-88.76
OFFICE VISITS	249	0.00	0.80	7.23	9.24	39.76	24.90	17.67	0.40	0.00	0.00	0.00	2075.45	-54.67
HOSPITAL VISITS	206	0.00	0.00	2.43	4.85	24.76	36.41	24.27	6.80	0.49	0.00	0.00	1538.99	-23.80
SURGERY	238	0.00	0.00	3.78	4.62	21.43	34.87	26.05	4.20	4.62	0.42	0.00	11199.11	13.83
RADIOLOGY	197	0.00	0.00	6.09	5.08	32.99	24.37	26.40	5.08	0.00	0.00	0.00	2270.98	-21.92
OPHTHALMOLOGY														
ALL PROCEDURES	238	0.00	0.00	1.68	2.52	18.91	38.66	29.41	7.98	0.84	0.00	0.00	16010.88	-31.29
OFFICE VISITS	237	0.00	0.00	1.27	2.11	23.21	27.85	41.35	3.80	0.42	0.00	0.00	2604.22	-2.05
TOTAL MEDICINE	238	0.00	0.00	1.26	2.94	22.27	36.13	33.61	3.36	0.42	0.00	0.00	5870.47	-24.62
SURGERY	215	0.00	0.00	3.72	3.72	13.49	44.19	22.33	6.05	6.51	0.00	0.00	11199.43	-7.35

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	3212	0.00	0.03	2.86	4.76	26.06	29.02	31.07	4.48	1.65	0.06	0.00	12362.24	-96.05
OFFICE VISITS	3112	0.00	0.19	4.40	5.11	29.24	26.35	29.60	3.41	1.67	0.03	0.00	3921.78	-42.46
HOSPITAL VISITS	2450	0.00	0.12	3.10	4.00	18.04	28.94	34.00	8.45	2.98	0.37	0.00	4309.90	-26.33
TOTAL MEDICINE	2329	0.00	0.09	3.31	4.42	24.90	27.39	33.28	4.68	1.85	0.09	0.00	10649.11	-92.94
SURGERY	2458	0.00	0.00	2.85	4.27	17.25	47.64	20.14	4.31	3.25	0.28	0.00	3603.90	-6.22
PATHOLOGY	1686	0.00	0.36	3.32	6.88	29.72	42.41	12.81	2.31	2.19	0.00	0.00	1030.03	-19.48
RADIOLOGY	1037	0.00	0.10	4.15	8.20	25.65	37.13	20.06	3.47	1.25	0.00	0.00	1332.63	-12.86
GENERAL PRACTICE														
ALL PROCEDURES	1129	0.00	0.00	1.42	2.57	17.36	27.99	41.98	5.85	2.66	0.18	0.00	7638.55	49.22
OFFICE VISITS	1091	0.00	0.00	1.92	2.93	17.42	26.58	41.89	5.68	3.48	0.09	0.00	3733.46	23.61
HOSPITAL VISITS	861	0.00	0.00	2.09	1.97	10.45	30.55	40.30	9.41	4.53	0.70	0.00	2641.99	35.08
TOTAL MEDICINE	1127	0.00	0.00	1.69	2.48	15.88	26.80	42.32	7.19	3.46	0.18	0.00	6497.38	59.46
SURGERY	839	0.00	0.00	1.31	3.46	15.61	57.21	17.40	2.98	1.67	0.35	0.00	529.14	1.92
PATHOLOGY	956	0.00	0.52	2.72	7.11	29.39	41.53	12.87	2.93	2.93	0.00	0.00	500.83	-9.71
RADIOLOGY	489	0.00	0.20	5.11	9.61	23.72	35.79	19.22	4.29	2.04	0.00	0.00	774.27	-7.82
GENERAL SURGERY														
ALL PROCEDURES	625	0.00	0.00	2.72	4.80	27.68	29.60	27.68	5.28	2.24	0.00	0.00	7816.53	-48.11
OFFICE VISITS	606	0.00	0.17	3.47	5.28	25.25	28.05	32.01	4.13	1.65	0.00	0.00	1331.32	-6.21
HOSPITAL VISITS	510	0.00	0.00	2.35	4.90	13.92	31.37	33.33	9.61	3.92	0.59	0.00	1209.56	3.39
SURGERY	563	0.00	0.00	6.57	7.10	24.51	33.39	19.18	5.86	3.20	0.18	0.00	5349.56	-37.21

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	3010	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	8416.57	0.00
OFFICE VISITS	2929	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	2658.41	0.00
HOSPITAL VISITS	2014	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	2881.00	0.00
TOTAL MEDICINE	2184	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	7103.57	0.00
SURGERY	2087	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	2812.75	0.00
PATHOLOGY	1546	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	819.50	0.00
RADIOLOGY	925	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1032.99	0.00
GENERAL PRACTICE														
ALL PROCEDURES	1064	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	4706.91	0.00
OFFICE VISITS	1032	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	2391.49	0.00
HOSPITAL VISITS	700	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1702.27	0.00
TOTAL MEDICINE	1060	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	3892.10	0.00
SURGERY	712	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	463.97	0.00
PATHOLOGY	864	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	367.79	0.00
RADIOLOGY	416	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	563.45	0.00
GENERAL SURGERY														
ALL PROCEDURES	578	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	5096.15	0.00
OFFICE VISITS	559	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	844.37	0.00
HOSPITAL VISITS	375	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	746.22	0.00
SURGERY	466	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	4193.12	0.00

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	898	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	13303.83	0.00
OFFICE VISITS	880	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	5263.26	0.00
HOSPITAL VISITS	770	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	5364.75	0.00
TOTAL MEDICINE	894	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	11598.32	0.00
SURGERY	509	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	441.38	0.00
PATHOLOGY	682	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1391.75	0.00
RADIOLOGY	331	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1221.14	0.00
ORTHOPEDIC SURGERY														
ALL PROCEDURES	240	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	11759.19	0.00
OFFICE VISITS	231	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1620.58	0.00
HOSPITAL VISITS	169	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1183.70	0.00
SURGERY	211	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	8413.01	0.00
RADIOLOGY	178	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1780.46	0.00
OPHTHALMOLOGY														
ALL PROCEDURES	230	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	11352.65	0.00
OFFICE VISITS	227	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	1877.77	0.00
TOTAL MEDICINE	230	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	4433.32	0.00
SURGERY	189	0.00	0.00	0.00	0.00	0.00	100	0.00	0.00	0.00	0.00	0.00	8391.92	0.00

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	3212	0	1	92	153	837	932	998	144	53	2	0	12362.24	-96.05
OFFICE VISITS	3112	0	6	137	159	910	820	921	106	52	1	0	3921.78	-42.46
HOSPITAL VISITS	2450	0	3	76	98	442	709	833	207	73	9	0	4309.90	-26.33
TOTAL MEDICINE	2329	0	2	77	103	580	638	775	109	43	2	0	10649.11	-92.94
SURGERY	2458	0	0	70	105	424	1171	495	106	80	7	0	3603.90	-6.22
PATHOLOGY	1686	0	6	56	116	501	715	216	39	37	0	0	1030.03	-19.48
RADIOLOGY	1037	0	1	43	85	266	385	208	36	13	0	0	1332.63	-12.86
GENERAL PRACTICE														
ALL PROCEDURES	1129	0	0	16	29	196	316	474	66	30	2	0	7638.55	49.22
OFFICE VISITS	1091	0	0	21	32	190	290	457	62	38	1	0	3733.46	23.61
HOSPITAL VISITS	861	0	0	18	17	90	263	347	81	39	6	0	2641.99	35.08
TOTAL MEDICINE	1127	0	0	19	28	179	302	477	81	39	2	0	6497.38	59.46
SURGERY	839	0	0	11	29	131	480	146	25	14	3	0	529.14	1.92
PATHOLOGY	956	0	5	26	68	281	397	123	28	28	0	0	500.83	-9.71
RADIOLOGY	489	0	1	25	47	116	175	94	21	10	0	0	774.27	-7.82
GENERAL SURGERY														
ALL PROCEDURES	625	0	0	17	30	173	185	173	33	14	0	0	7816.53	-48.11
OFFICE VISITS	606	0	1	21	32	153	170	194	25	10	0	0	1331.32	-6.21
HOSPITAL VISITS	510	0	0	12	25	71	160	170	49	20	3	0	1209.56	3.39
SURGERY	563	0	0	37	40	138	188	108	33	18	1	0	5349.56	-37.21

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	965	0	1	49	67	348	265	215	17	3	0	0	18886.17	-314.94
OFFICE VISITS	929	0	3	74	67	413	232	128	9	3	0	0	6663.73	-150.73
HOSPITAL VISITS	873	0	3	41	46	230	211	266	63	13	0	0	8419.92	-104.86
TOTAL MEDICINE	964	0	2	55	68	348	250	218	20	3	0	0	16682.64	-287.98
SURGERY	603	0	0	5	17	75	325	131	25	23	2	0	546.23	3.89
PATHOLOGY	730	0	1	30	48	220	318	93	11	9	0	0	1723.06	-32.27
RADIOLOGY	351	0	0	6	28	85	162	62	5	3	0	0	1583.86	-14.84
ORTHOPEDIC SURGERY														
ALL PROCEDURES	255	0	0	6	21	75	74	66	9	4	0	0	16323.66	-88.76
OFFICE VISITS	249	0	2	18	23	99	62	44	1	0	0	0	2075.45	-54.67
HOSPITAL VISITS	206	0	0	5	10	51	75	50	14	1	0	0	1538.99	-23.80
SURGERY	238	0	0	9	11	51	83	62	10	11	1	0	11199.11	13.83
RADIOLOGY	197	0	0	12	10	65	48	52	10	0	0	0	2270.98	-21.82
OPHTHALMOLOGY														
ALL PROCEDURES	238	0	0	4	6	45	92	70	19	2	0	0	16010.88	-31.29
OFFICE VISITS	237	0	0	3	5	55	66	98	9	1	0	0	2604.22	-2.05
TOTAL MEDICINE	238	0	0	3	7	53	86	80	8	1	0	0	5870.47	-24.67
SURGERY	215	0	0	8	8	29	95	48	13	14	0	0	11199.43	-7.35

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	3010	0	0	0	0	0	3010	0	0	0	0	0	8416.57	0.00
OFFICE VISITS	2929	0	0	0	0	0	2929	0	0	0	0	0	2858.41	0.00
HOSPITAL VISITS	2014	0	0	0	0	0	2014	0	0	0	0	0	2881.00	0.00
TOTAL MEDICINE	2184	0	0	0	0	0	2184	0	0	0	0	0	7103.57	0.00
SURGERY	2087	0	0	0	0	0	2087	0	0	0	0	0	2812.75	0.00
PATHOLOGY	1546	0	0	0	0	0	1546	0	0	0	0	0	819.50	0.00
RADIOLOGY	925	0	0	0	0	0	925	0	0	0	0	0	1032.99	0.00
GENERAL PRACTICE														
ALL PROCEDURES	1064	0	0	0	0	0	1064	0	0	0	0	0	4706.91	0.00
OFFICE VISITS	1032	0	0	0	0	0	1032	0	0	0	0	0	2391.49	0.00
HOSPITAL VISITS	700	0	0	0	0	0	700	0	0	0	0	0	1702.27	0.00
TOTAL MEDICINE	1060	0	0	0	0	0	1060	0	0	0	0	0	3892.10	0.00
SURGERY	712	0	0	0	0	0	712	0	0	0	0	0	463.97	0.00
PATHOLOGY	864	0	0	0	0	0	864	0	0	0	0	0	367.79	0.00
RADIOLOGY	416	0	0	0	0	0	416	0	0	0	0	0	563.45	0.00
GENERAL SURGERY														
ALL PROCEDURES	578	0	0	0	0	0	578	0	0	0	0	0	5096.15	0.00
OFFICE VISITS	559	0	0	0	0	0	559	0	0	0	0	0	844.37	0.00
HOSPITAL VISITS	375	0	0	0	0	0	375	0	0	0	0	0	746.22	0.00
SURGERY	466	0	0	0	0	0	466	0	0	0	0	0	4193.12	0.00

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	898	0	0	0	0	0	898	0	0	0	0	0	13303.83	0.00
OFFICE VISITS	880	0	0	0	0	0	880	0	0	0	0	0	5263.26	0.00
HOSPITAL VISITS	770	0	0	0	0	0	770	0	0	0	0	0	5364.75	0.00
TOTAL MEDICINE	894	0	0	0	0	0	894	0	0	0	0	0	11598.32	0.00
SURGERY	509	0	0	0	0	0	509	0	0	0	0	0	441.39	0.00
PATHOLOGY	682	0	0	0	0	0	682	0	0	0	0	0	1391.75	0.00
RADIOLOGY	331	0	0	0	0	0	331	0	0	0	0	0	1221.14	0.00
ORTHOPEDIC SURGERY														
ALL PROCEDURES	240	0	0	0	0	0	240	0	0	0	0	0	11759.18	0.00
OFFICE VISITS	231	0	0	0	0	0	231	0	0	0	0	0	1620.58	0.00
HOSPITAL VISITS	169	0	0	0	0	0	169	0	0	0	0	0	1183.70	0.00
SURGERY	211	0	0	0	0	0	211	0	0	0	0	0	8413.01	0.00
RADIOLOGY	178	0	0	0	0	0	178	0	0	0	0	0	1780.46	0.00
OPHTHALMOLOGY														
ALL PROCEDURES	230	0	0	0	0	0	230	0	0	0	0	0	11352.65	0.00
OFFICE VISITS	227	0	0	0	0	0	227	0	0	0	0	0	1877.77	0.00
TOTAL MEDICINE	230	0	0	0	0	0	230	0	0	0	0	0	4433.32	0.00
SURGERY	189	0	0	0	0	0	189	0	0	0	0	0	8391.92	0.00

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	2568	0	10	320	340	496	170	669	346	197	20	0	2044.61	-76.00
OFFICE VISITS	2227	0	27	463	318	354	141	420	322	159	23	0	415.22	-29.31
HOSPITAL VISITS	1535	0	7	162	110	291	113	419	248	165	20	0	1313.45	-35.57
TOTAL MEDICINE	1871	0	8	227	226	369	113	488	269	158	13	0	1646.83	-73.07
SURGERY	1019	0	4	145	136	153	168	155	132	116	10	0	1386.45	-27.10
PATHOLOGY	834	0	11	148	176	143	110	112	48	83	2	1	193.64	-12.91
RADIOLOGY	483	0	0	85	134	58	26	66	79	34	1	0	287.81	-11.98
GENERAL PRACTICE														
ALL PROCEDURES	848	0	1	53	65	143	66	271	150	87	12	0	859.51	9.75
OFFICE VISITS	755	0	0	67	61	102	55	186	186	85	13	0	301.80	2.62
HOSPITAL VISITS	479	0	1	26	22	62	39	160	86	71	12	0	722.91	17.33
TOTAL MEDICINE	841	0	1	57	60	134	62	257	164	94	12	0	777.58	11.50
SURGERY	225	0	0	17	26	33	56	39	29	21	4	0	130.26	2.07
PATHOLOGY	420	0	7	59	89	70	64	59	25	44	2	1	59.59	-2.78
RADIOLOGY	191	0	0	38	48	23	16	21	29	15	1	0	107.80	-3.67
GENERAL SURGERY														
ALL PROCEDURES	483	0	1	68	66	92	37	112	66	37	4	0	1790.80	-39.29
OFFICE VISITS	384	0	2	59	38	66	36	93	59	25	6	0	281.55	-3.90
HOSPITAL VISITS	280	0	2	23	23	40	31	83	43	29	6	0	514.27	2.34
SURGERY	328	0	3	75	53	61	29	38	36	32	1	0	1629.63	-45.59

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	837	0	4	146	157	191	33	185	80	40	1	0	3074.01	-185.66
OFFICE VISITS	753	0	10	250	186	134	25	77	40	29	2	0	653.23	-79.70
HOSPITAL VISITS	667	0	4	94	58	162	34	152	106	55	2	0	2212.15	-91.45
TOTAL MEDICINE	836	0	5	152	152	191	37	174	76	48	1	0	2781.24	-171.87
SURGERY	237	0	1	23	18	30	52	45	32	35	1	0	190.51	3.70
PATHOLOGY	414	0	4	89	87	73	46	53	23	39	0	0	329.64	-23.19
RADIOLOGY	164	0	0	19	64	14	9	23	22	13	0	0	403.53	-18.73
ORTHOPEDIC SURGERY														
ALL PROCEDURES	201	0	2	31	33	33	13	50	26	11	2	0	2957.21	-87.99
OFFICE VISITS	179	0	12	67	19	26	12	25	12	5	1	0	283.52	-33.47
HOSPITAL VISITS	109	0	0	19	7	27	9	24	13	10	0	0	462.15	-23.52
SURGERY	139	0	0	16	25	21	16	20	28	10	3	0	2997.48	-38.45
RADIOLOGY	128	0	0	28	22	21	1	22	28	6	0	0	408.14	-15.75
OPHTHALMOLOGY														
ALL PROCEDURES	199	0	2	22	19	37	21	51	24	22	1	0	2459.25	-57.15
OFFICE VISITS	156	0	3	20	14	26	13	39	25	15	1	0	295.42	1.63
TOTAL MEDICINE	194	0	2	18	14	44	14	57	29	16	0	0	526.60	-13.95
SURGERY	90	0	0	14	14	8	15	13	7	18	1	0	4301.86	-96.23

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	2874	0	5	269	402	610	180	768	411	223	6	0	3174.36	-39.44
OFFICE VISITS	2706	0	27	478	399	445	175	613	363	187	19	0	1074.50	-24.71
HOSPITAL VISITS	1848	0	10	161	119	342	142	516	295	247	16	0	1483.11	-5.36
TOTAL MEDICINE	2089	0	4	212	274	411	128	576	313	166	5	0	2970.98	-38.17
SURGERY	1544	0	0	152	209	236	271	263	194	198	21	0	1020.33	7.99
PATHOLOGY	1266	0	14	210	320	242	158	121	56	137	6	2	243.43	-17.43
RADIOLOGY	709	0	1	121	164	99	36	110	125	53	0	0	405.37	-10.64
GENERAL PRACTICE														
ALL PROCEDURES	1016	0	0	35	94	159	77	342	206	98	5	0	2841.44	46.56
OFFICE VISITS	970	0	0	74	85	129	77	290	198	104	13	0	1419.92	24.57
HOSPITAL VISITS	655	0	0	27	22	86	57	216	129	112	6	0	1125.03	33.44
TOTAL MEDICINE	1011	0	0	43	77	143	72	347	210	114	5	0	2515.30	56.72
SURGERY	491	0	0	27	52	103	119	82	62	41	5	0	171.68	2.33
PATHOLOGY	729	0	11	100	179	130	111	75	31	87	3	2	186.55	-11.13
RADIOLOGY	339	0	1	71	68	43	22	47	61	26	0	0	364.69	-9.22
GENERAL SURGERY														
ALL PROCEDURES	552	0	0	48	74	122	37	139	79	53	0	0	1947.10	-20.09
OFFICE VISITS	502	0	3	65	53	97	49	121	79	30	5	0	451.52	-4.57
HOSPITAL VISITS	337	0	1	37	15	50	30	101	56	38	9	0	572.84	3.18
SURGERY	397	0	0	76	78	60	30.	60	41	50	2	0	1318.13	-15.10

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	857	0	4	145	178	227	36	168	67	32	0	0	4323.65	-173.32
OFFICE VISITS	809	0	12	259	204	146	24	95	42	27	0	0	1318.98	-98.90
HOSPITAL VISITS	719	0	7	81	71	177	47	155	93	87	1	0	2425.91	-42.48
TOTAL MEDICINE	855	0	4	153	175	221	38	161	67	36	0	0	3962.64	-156.64
SURGERY	311	0	0	16	34	29	66	67	42	52	5	0	191.51	4.73
PATHOLOGY	537	0	3	110	141	112	47	46	25	50	3	0	320.66	-25.98
RADIOLOGY	210	0	0	22	72	23	10	35	29	19	0	0	407.42	-10.17
ORTHOPEDIC SURGERY														
ALL PROCEDURES	225	0	1	26	38	54	12	55	22	16	1	0	3315.25	-21.99
OFFICE VISITS	213	0	9	64	35	34	13	43	9	5	1	0	430.43	-35.78
HOSPITAL VISITS	137	0	2	16	11	29	8	44	17	10	0	0	486.22	-17.07
SURGERY	181	0	0	16	25	30	18	37	25	24	6	0	2616.54	47.72
RADIOLOGY	160	0	0	28	24	33	4	28	35	8	0	0	488.87	-14.27
OPHTHALMOLOGY														
ALL PROCEDURES	224	0	0	15	18	48	18	64	37	24	0	0	3170.04	17.53
OFFICE VISITS	212	0	3	16	22	39	12	64	35	21	0	0	683.31	-3.49
TOTAL MEDICINE	223	0	0	16	22	47	18	68	36	16	0	0	1234.75	-14.15
SURGERY	164	0	0	17	20	14	38	17	24	31	3	0	2650.24	43.18

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	2568	0.00	0.39	12.46	13.24	19.31	6.62	26.05	13.47	7.67	0.78	0.00	2044.61	-76.00
OFFICE VISITS	2227	0.00	1.21	20.79	14.28	15.90	6.33	18.86	14.46	7.14	1.03	0.00	415.22	-29.31
HOSPITAL VISITS	1535	0.00	0.46	10.55	7.17	18.96	7.36	27.30	16.16	10.75	1.30	0.00	1313.45	-35.57
TOTAL MEDICINE	1871	0.00	0.43	12.13	12.08	19.72	6.04	26.08	14.38	8.44	0.69	0.00	1646.83	-73.07
SURGERY	1019	0.00	0.39	14.23	13.35	15.01	16.49	15.21	12.95	11.38	0.98	0.00	1386.45	-27.10
PATHOLOGY	834	0.00	1.32	17.75	21.10	17.15	13.19	13.43	5.76	9.95	0.24	0.12	193.64	-12.91
RADIOLOGY	483	0.00	0.00	17.60	27.74	12.01	5.38	13.66	16.36	7.04	0.21	0.00	287.81	-11.98
GENERAL PRACTICE														
ALL PROCEDURES	848	0.00	0.12	6.25	7.67	16.86	7.78	31.96	17.69	10.26	1.42	0.00	859.51	9.75
OFFICE VISITS	755	0.00	0.00	8.87	8.08	13.51	7.28	24.64	24.64	11.26	1.72	0.00	301.80	2.62
HOSPITAL VISITS	479	0.00	0.21	5.43	4.59	12.94	8.14	33.40	17.95	14.82	2.51	0.00	722.91	17.33
TOTAL MEDICINE	841	0.00	0.12	6.78	7.13	15.93	7.37	30.56	19.50	11.18	1.43	0.00	777.58	11.50
SURGERY	225	0.00	0.00	7.56	11.56	14.67	24.89	17.33	12.89	9.33	1.78	0.00	130.26	2.07
PATHOLOGY	420	0.00	1.67	14.05	21.19	16.67	15.24	14.05	5.95	10.48	0.48	0.24	59.59	-2.78
RADIOLOGY	191	0.00	0.00	19.90	25.13	12.04	8.38	10.99	15.18	7.85	0.52	0.00	107.80	-3.67
GENERAL SURGERY														
ALL PROCEDURES	483	0.00	0.21	14.08	13.66	19.05	7.66	23.19	13.66	7.66	0.83	0.00	1790.80	-39.25
OFFICE VISITS	384	0.00	0.52	15.36	9.90	17.19	9.38	24.22	15.36	6.51	1.56	0.00	281.55	-3.90
HOSPITAL VISITS	280	0.00	0.71	8.21	8.21	14.29	11.07	29.64	15.36	10.36	2.14	0.00	514.27	2.34
SURGERY	328	0.00	0.91	22.87	16.16	18.60	8.84	11.59	10.98	9.76	0.30	0.00	1629.63	-45.55

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUE PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	837	0.00	0.48	17.44	18.76	22.82	3.94	22.10	9.56	4.78	0.12	0.00	3074.01	-185.66
OFFICE VISITS	753	0.00	1.33	33.20	24.70	17.80	3.32	10.23	5.31	3.85	0.27	0.00	653.23	-79.70
HOSPITAL VISITS	667	0.00	0.60	14.09	8.70	24.29	5.10	22.79	15.89	8.25	0.30	0.00	2212.15	-91.45
TOTAL MEDICINE	836	0.00	0.60	18.18	18.18	22.85	4.43	20.81	9.09	5.74	0.12	0.00	2761.24	-171.87
SURGERY	237	0.00	0.42	9.70	7.59	12.66	21.94	18.99	13.50	14.77	0.42	0.00	190.51	3.70
PATHOLOGY	414	0.00	0.97	21.50	21.01	17.63	11.11	12.80	5.56	9.42	0.00	0.00	329.64	-23.19
RADIOLOGY	164	0.00	0.00	11.59	39.02	8.54	5.49	14.02	13.41	7.93	0.00	0.00	403.53	-18.73
ORTHOPEDIC SURGERY														
ALL PROCEDURES	201	0.00	1.00	15.42	16.42	16.42	6.47	24.08	12.94	5.47	1.00	0.00	2957.21	-87.99
OFFICE VISITS	179	0.00	6.70	37.43	10.61	14.53	6.70	13.97	6.70	2.79	0.56	0.00	283.52	-33.47
HOSPITAL VISITS	109	0.00	0.00	17.43	6.42	24.77	8.26	22.02	11.93	9.17	0.00	0.00	462.15	-23.52
SURGERY	139	0.00	0.00	11.51	17.99	15.11	11.51	14.39	20.14	7.19	2.16	0.00	2997.48	-38.45
RADIOLOGY	128	0.00	0.00	21.88	17.19	16.41	0.78	17.19	21.88	4.69	0.00	0.00	408.14	-15.75
OPHTHALMOLOGY														
ALL PROCEDURES	199	0.00	1.01	11.06	9.55	18.59	10.55	25.63	12.06	11.06	0.50	0.00	2459.25	-57.15
OFFICE VISITS	156	0.00	1.92	12.82	8.97	16.67	8.33	25.00	16.03	9.62	0.64	0.00	295.42	1.63
TOTAL MEDICINE	194	0.00	1.03	9.28	7.22	22.68	7.22	29.38	14.95	8.25	0.00	0.00	526.60	-13.95
SURGERY	90	0.00	0.00	15.56	15.56	8.89	16.67	14.44	7.78	20.00	1.11	0.00	4301.86	-96.23

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	2874	0.00	0.17	9.36	13.99	21.22	6.26	26.72	14.30	7.76	0.21	0.00	3174.36	-39.44
OFFICE VISITS	2706	0.00	1.00	17.66	14.75	16.44	6.47	22.65	13.41	6.91	0.70	0.00	1074.50	-24.71
HOSPITAL VISITS	1848	0.00	0.54	8.71	6.44	18.51	7.68	27.92	15.96	13.37	0.87	0.00	1483.11	-5.36
TOTAL MEDICINE	2089	0.00	0.19	10.15	13.12	19.67	6.13	27.57	14.98	7.95	0.24	0.00	2970.98	-38.17
SURGERY	1544	0.00	0.00	9.84	13.54	15.28	17.55	17.03	12.56	12.82	1.36	0.00	1020.33	7.99
PATHOLOGY	1266	0.00	1.11	16.59	25.28	19.12	12.48	9.56	4.42	10.82	0.47	0.16	243.43	-17.43
RADIOLOGY	709	0.00	0.14	17.07	23.13	13.96	5.08	15.51	17.63	7.48	0.00	0.00	405.37	-10.64
GENERAL PRACTICE														
ALL PROCEDURES	1016	0.00	0.00	3.44	9.25	15.65	7.58	33.66	20.28	9.65	0.49	0.00	2841.44	46.56
OFFICE VISITS	970	0.00	0.00	7.63	8.76	13.30	7.94	29.90	20.41	10.72	1.34	0.00	1419.92	24.52
HOSPITAL VISITS	655	0.00	0.00	4.12	3.36	13.13	8.70	32.98	19.69	17.10	0.92	0.00	1125.03	33.44
TOTAL MEDICINE	1011	0.00	0.00	4.25	7.62	14.14	7.12	34.32	20.77	11.28	0.49	0.00	2515.30	56.72
SURGERY	491	0.00	0.00	5.50	10.59	20.98	24.24	16.70	12.63	8.35	1.02	0.00	171.68	2.33
PATHOLOGY	729	0.00	1.51	13.72	24.55	17.83	15.23	10.29	4.25	11.93	0.41	0.27	186.55	-11.13
RADIOLOGY	339	0.00	0.29	20.94	20.06	12.68	6.49	13.86	17.99	7.67	0.00	0.00	364.69	-9.22
GENERAL SURGERY														
ALL PROCEDURES	552	0.00	0.00	8.70	13.41	22.10	6.70	25.18	14.31	9.60	0.00	0.00	1947.10	-20.09
OFFICE VISITS	502	0.00	0.60	12.95	10.56	19.32	9.76	24.10	15.74	5.98	1.00	0.00	451.52	-4.52
HOSPITAL VISITS	337	0.00	0.30	10.98	4.45	14.84	8.90	29.97	16.62	11.28	2.67	0.00	572.84	3.18
SURGERY	397	0.00	0.00	19.14	19.65	15.11	7.56	15.11	10.33	12.59	0.50	0.00	1318.13	-15.10

TABLE 2
DISTRIBUTION OF PHYSICIANS BY PERCENTAGE CHANGE IN PROGRAM REVENUES RESULTING FROM IMPLEMENTATION OF STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NO. MDS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	REVENUES PER MD	AVG. CHANGE IN REVENUES PER MD
INTERNAL MEDICINE														
ALL PROCEDURES	857	0.00	0.47	16.92	20.77	26.49	4.20	19.60	7.82	3.73	0.00	0.00	4323.65	-173.32
OFFICE VISITS	809	0.00	1.48	32.01	25.22	18.05	2.97	11.74	5.19	3.34	0.00	0.00	1318.98	-98.90
HOSPITAL VISITS	719	0.00	0.97	11.27	9.87	24.62	6.54	21.56	12.93	12.10	0.14	0.00	2425.91	-42.48
TOTAL MEDICINE	855	0.00	0.47	17.89	20.47	25.85	4.44	18.83	7.84	4.21	0.00	0.00	3962.64	-156.64
SURGERY	311	0.00	0.00	5.14	10.93	9.32	21.22	21.54	13.50	16.72	1.61	0.00	191.51	4.73
PATHOLOGY	537	0.00	0.56	20.48	26.26	20.86	8.75	8.57	4.66	9.31	0.56	0.00	320.66	-25.98
RADIOLOGY	210	0.00	0.00	10.48	34.29	10.95	4.76	16.67	13.81	9.05	0.00	0.00	407.42	-10.17
ORTHOPEDIC SURGERY														
ALL PROCEDURES	225	0.00	0.44	11.56	16.89	24.00	5.33	24.44	9.78	7.11	0.44	0.00	3315.25	-21.95
OFFICE VISITS	213	0.00	4.23	30.05	16.43	15.96	6.10	20.19	4.23	2.35	0.47	0.00	430.43	-35.78
HOSPITAL VISITS	137	0.00	1.46	11.68	8.03	21.17	5.84	32.12	12.41	7.30	0.00	0.00	486.22	-17.07
SURGERY	181	0.00	0.00	8.84	13.81	16.57	9.94	20.44	13.81	13.26	3.31	0.00	2616.54	47.72
RADIOLOGY	160	0.00	0.00	17.50	15.00	20.63	2.50	17.50	21.88	5.00	0.00	0.00	488.87	-14.27
OPHTHALMOLOGY														
ALL PROCEDURES	224	0.00	0.00	6.70	8.04	21.43	8.04	28.57	16.52	10.71	0.00	0.00	3170.04	17.53
OFFICE VISITS	212	0.00	1.42	7.55	10.38	18.40	5.66	30.19	16.51	9.91	0.00	0.00	683.31	-3.49
TOTAL MEDICINE	223	0.00	0.00	7.17	9.87	21.08	8.07	30.49	16.14	7.17	0.00	0.00	1234.75	-14.15
SURGERY	164	0.00	0.00	10.37	12.20	8.54	23.17	10.37	14.63	18.90	1.83	0.00	2650.24	43.18

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE													
ALL PROCEDURES	0	72	74097	110900	121127	18231	71571	28524	7504	0	0	19.99	-0.97
OFFICE VISITS	0	2335	55792	41514	31718	2914	17788	11153	3445	1	0	19.91	-1.67
HOSPITAL VISITS	0	477	16281	16902	29940	3977	25649	17036	9915	215	0	25.05	-0.56
TOTAL MEDICINE	0	65	58454	85221	85415	14496	48170	26973	8561	0	0	23.05	-1.17
SURGERY	0	11	357	191	729	913	1391	731	641	23	0	36.69	0.82
PATHOLOGY	0	1066	18925	14450	22996	5221	12805	7541	5824	0	0	6.74	-0.33
RADIOLOGY	0	1	842	4841	929	225	1909	1506	603	0	0	28.45	-0.74
ORTHOPEDIC SURGERY													
ALL PROCEDURES	0	0	4645	9399	12891	922	6270	4011	816	0	0	53.86	-1.35
OFFICE VISITS	0	1103	4853	2809	2423	578	1454	383	233	0	0	19.18	-2.15
HOSPITAL VISITS	0	0	1702	558	1597	549	1314	750	662	38	0	21.30	-0.98
SURGERY	0	0	434	754	1668	121	596	518	355	36	0	296.22	-0.67
RADIOLOGY	0	0	1486	1806	1600	186	1304	2150	234	0	0	28.54	-0.80
OPHTHALMOLOGY													
ALL PROCEDURES	0	0	2825	7577	6484	4833	10272	5288	2098	0	0	51.74	-0.45
OFFICE VISITS	0	66	1183	2804	2992	1295	6226	2589	1318	1	0	18.27	-0.06
TOTAL MEDICINE	0	0	2130	3397	9324	2964	14619	3846	932	0	0	22.77	-0.14
SURGERY	0	0	222	362	270	95	366	339	221	27	0	623.75	-6.35

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES													
ALL PROCEDURES	0	156	41434	30008	39265	7157	41132	16593	7306	264	0	28.64	-1.06
OFFICE VISITS	0	880	15135	7349	6513	2315	8625	5340	2303	172	0	19.01	-1.34
HOSPITAL VISITS	0	321	14439	8059	17892	4227	20365	11863	4774	594	0	24.43	-0.66
TOTAL MEDICINE	0	166	26996	22687	24674	4530	32199	12758	6043	148	0	23.67	-1.05
SURGERY	0	13	704	811	749	542	761	716	397	17	0	299.96	-5.96
PATHOLOGY	0	163	5674	6158	4553	1341	2634	913	887	9	6	7.23	-0.48
RADIOLOGY	0	0	800	1960	450	143	435	991	93	2	0	28.52	-1.19
GENERAL PRACTICE													
ALL PROCEDURES	0	38	3007	2393	7005	1874	13950	5541	3548	147	0	19.43	0.22
OFFICE VISITS	0	0	1630	1013	2144	911	3685	2817	1270	146	0	16.73	0.15
HOSPITAL VISITS	0	36	1209	367	1972	967	5713	2308	1894	370	0	23.34	0.56
TOTAL MEDICINE	0	37	3016	1446	5135	1553	12144	5149	3435	144	0	20.40	0.30
SURGERY	0	0	24	74	80	170	135	124	55	4	0	44.01	0.70
PATHOLOGY	0	14	396	1418	709	321	680	195	288	9	6	6.20	-0.29
RADIOLOGY	0	0	145	162	115	29	138	126	25	2	0	27.75	-0.94
GENERAL SURGERY													
ALL PROCEDURES	0	11	2398	2760	4250	1136	2998	1762	1170	81	0	52.21	-1.15
OFFICE VISITS	0	2	783	835	613	727	1394	1038	336	16	0	18.82	-0.26
HOSPITAL VISITS	0	5	546	605	698	914	1901	990	421	188	0	22.97	0.10
SURGERY	0	12	274	296	279	88	227	167	140	1	0	360.19	-10.08

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE													
ALL PROCEDURES	0	53	31983	22303	25396	3795	21568	7698	2262	4	0	22.36	-1.35
OFFICE VISITS	0	529	11510	4960	2986	536	2213	1042	473	5	0	20.28	-2.47
HOSPITAL VISITS	0	280	11984	7045	14499	2208	12299	8272	2363	36	0	25.01	-1.03
TOTAL MEDICINE	0	80	23779	19795	18660	2880	18880	7117	2394	4	0	24.84	-1.54
SURGERY	0	1	64	69	155	161	228	143	87	2	0	49.62	0.96
PATHOLOGY	0	149	5278	4740	3844	1020	1954	718	599	0	0	7.46	-0.52
RADIOLOGY	0	0	260	1197	157	109	153	355	30	0	0	29.27	-1.36
ORTHOPEDIC SURGERY													
ALL PROCEDURES	0	5	2179	1947	1821	153	1654	1253	92	29	0	65.08	-1.94
OFFICE VISITS	0	290	1070	358	447	63	393	104	12	1	0	18.54	-2.19
HOSPITAL VISITS	0	0	700	42	723	138	452	293	96	0	0	20.61	-1.05
SURGERY	0	0	231	292	216	41	105	210	54	9	0	359.80	-4.62
RADIOLOGY	0	0	395	601	178	5	144	510	38	0	0	27.92	-1.08
OPHTHALMOLOGY													
ALL PROCEDURES	0	49	1867	605	793	199	962	339	234	3	0	96.89	-2.25
OFFICE VISITS	0	59	142	183	323	78	940	339	212	4	0	20.21	0.11
TOTAL MEDICINE	0	49	201	1446	879	97	1175	492	214	0	0	22.44	-0.59
SURGERY	0	0	111	80	19	82	66	72	61	1	0	786.93	-17.60

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES													
ALL PROCEDURES	0	27	43013	56889	93227	16216	103498	53236	29025	261	0	23.07	-0.29
OFFICE VISITS	0	1239	28410	21069	27631	8444	37982	24558	13147	975	0	17.79	-0.41
HOSPITAL VISITS	0	89	13523	9686	23339	6773	27449	18350	12139	603	0	24.48	-0.09
TOTAL MEDICINE	0	13	30515	42078	63080	14229	79009	42277	24127	231	0	21.00	-0.27
SURGERY	0	0	862	1052	1069	1035	1404	1054	850	55	0	213.44	1.67
PATHOLOGY	0	247	12555	10129	10291	3016	3916	2982	3415	108	4	6.60	-0.47
RADIOLOGY	0	1	1566	2544	1432	239	1725	2171	565	0	0	28.06	-0.74
GENERAL PRACTICE													
ALL PROCEDURES	0	0	5401	17102	31892	7615	54489	32138	17264	259	0	17.37	0.28
OFFICE VISITS	0	0	7764	6937	11429	5043	24470	17701	9206	903	0	16.50	0.28
HOSPITAL VISITS	0	0	2739	1201	3848	3314	8024	6349	5432	335	0	23.59	0.70
TOTAL MEDICINE	0	0	4639	12143	19506	9129	46834	27605	17062	231	0	18.54	0.42
SURGERY	0	0	129	227	490	338	455	290	119	8	0	41.00	0.56
PATHOLOGY	0	167	5148	4958	4949	2108	1988	1759	1373	51	4	6.04	-0.36
RADIOLOGY	0	1	797	888	561	144	695	1162	202	0	0	27.78	-0.70
GENERAL SURGERY													
ALL PROCEDURES	0	0	2934	2668	8913	1083	7657	2497	2629	0	0	37.87	-0.39
OFFICE VISITS	0	102	1601	1102	2173	729	3530	2271	919	70	0	18.14	-0.18
HOSPITAL VISITS	0	4	871	760	1413	543	2632	1282	486	225	0	23.50	0.13
SURGERY	0	0	381	404	225	85	259	206	273	7	0	284.40	-3.26

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE													
ALL PROCEDURES	0	13	31394	33877	46090	6165	34716	15148	6501	0	0	21.31	-0.85
OFFICE VISITS	0	860	17094	11250	11699	1998	6449	3690	2181	0	0	19.32	-1.45
HOSPITAL VISITS	0	66	9244	7537	17508	2738	15877	10352	5991	43	0	25.15	-0.44
TOTAL MEDICINE	0	13	24738	27831	40671	4432	28433	13194	6123	0	0	23.30	-0.92
SURGERY	0	0	57	133	146	279	296	222	125	9	0	47.01	1.16
PATHOLOGY	0	80	7407	5171	5342	908	1928	1223	2042	57	0	7.13	-0.58
RADIOLOGY	0	0	252	1165	345	51	584	395	252	0	0	28.11	-0.70
ORTHOPEDIC SURGERY													
ALL PROCEDURES	0	14	1841	2267	2639	637	3113	1529	1092	2	0	56.79	-0.38
OFFICE VISITS	0	255	1317	555	924	383	992	110	62	2	0	19.93	-1.66
HOSPITAL VISITS	0	19	669	188	570	178	916	367	230	0	0	21.23	-0.75
SURGERY	0	0	218	187	167	102	293	230	178	18	0	339.98	6.20
RADIOLOGY	0	0	517	491	526	44	446	614	111	0	0	28.45	-0.93
OPHTHALMOLOGY													
ALL PROCEDURES	0	0	1443	975	3693	716	3523	1924	1539	0	0	51.41	0.28
OFFICE VISITS	0	22	634	1225	1406	291	2541	786	779	0	0	18.85	-0.10
TOTAL MEDICINE	0	0	1138	2104	2903	668	3742	1478	942	0	0	21.22	-0.24
SURGERY	0	0	77	101	41	231	101	106	155	13	0	526.84	8.58

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	1356044	0.00	0.01	12.67	19.16	23.93	4.71	24.29	10.87	4.34	0.02	0.00	24.50	-0.57
OFFICE VISITS	553869	0.00	0.96	21.90	15.57	16.68	3.73	22.24	13.17	5.52	0.24	0.00	18.16	-0.75
HOSPITAL VISITS	371013	0.00	0.07	13.13	10.21	21.55	4.81	25.25	15.66	8.87	0.44	0.00	24.43	-0.30
TOTAL MEDICINE	969186	0.00	0.01	12.43	18.91	21.13	5.44	24.35	12.61	5.09	0.03	0.00	21.58	-0.57
SURGERY	34097	0.00	0.06	9.89	13.47	21.69	8.16	23.18	13.26	9.98	0.29	0.01	217.12	-1.20
PATHOLOGY	190704	0.00	0.19	23.55	19.06	23.54	6.60	13.54	7.30	6.21	0.00	0.00	6.63	-0.37
RADIOLOGY	41212	0.00	0.01	14.21	29.96	13.05	3.00	15.59	19.93	4.24	0.00	0.00	28.27	-0.82
GENERAL PRACTICE														
ALL PROCEDURES	427626	0.00	0.00	3.51	10.94	19.53	4.56	37.13	16.96	7.29	0.06	0.00	17.51	0.23
OFFICE VISITS	219029	0.00	0.00	9.44	8.11	14.40	4.44	32.75	21.13	9.20	0.53	0.00	16.21	0.25
HOSPITAL VISITS	85955	0.00	0.00	6.82	4.04	13.34	7.01	33.98	19.13	14.70	0.99	0.00	23.41	0.64
TOTAL MEDICINE	348067	0.00	0.00	4.23	9.86	15.27	5.56	35.50	19.86	9.65	0.08	0.00	18.48	0.35
SURGERY	8478	0.00	0.00	2.11	9.99	26.68	10.52	30.68	14.46	5.48	0.05	0.02	44.01	0.76
PATHOLOGY	59416	0.00	0.59	17.92	23.81	22.19	7.40	14.55	7.22	6.33	0.00	0.00	6.02	-0.31
RADIOLOGY	11665	0.00	0.02	17.25	20.86	14.51	5.10	16.64	20.44	5.19	0.00	0.00	27.77	-0.79
GENERAL SURGERY														
ALL PROCEDURES	87952	0.00	0.00	13.24	12.48	28.36	3.58	25.11	9.42	7.82	0.00	0.00	47.09	-0.66
OFFICE VISITS	39093	0.00	0.42	13.25	9.31	16.24	5.70	32.16	15.21	7.27	0.43	0.00	17.76	-0.19
HOSPITAL VISITS	23573	0.00	0.00	8.84	9.84	16.05	7.59	31.48	16.82	6.96	2.41	0.00	23.22	0.15
SURGERY	8194	0.00	0.07	18.04	17.59	18.37	3.21	18.78	11.40	12.48	0.05	0.00	307.07	-4.93

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE														
ALL PROCEDURES	720992	0.00	0.01	18.02	24.92	25.93	4.58	17.33	7.06	2.14	0.00	0.00	20.69	-1.00
OFFICE VISITS	246135	0.00	1.36	35.30	22.81	18.57	2.49	10.52	6.84	2.11	0.00	0.00	19.81	-1.70
HOSPITAL VISITS	248734	0.00	0.10	15.15	12.52	25.09	3.56	21.80	14.64	7.06	0.07	0.00	25.07	-0.64
TOTAL MEDICINE	566379	0.00	0.02	18.11	24.97	24.62	5.04	16.40	8.34	2.50	0.00	0.00	23.41	-1.17
SURGERY	7164	0.00	0.21	5.86	5.79	17.25	15.13	29.59	14.66	11.15	0.35	0.00	40.15	0.90
PATHOLOGY	131288	0.00	0.01	26.10	16.91	24.16	6.24	13.09	7.33	6.15	0.00	0.00	6.91	-0.40
RADIOLOGY	16161	0.00	0.01	8.19	43.57	9.75	2.27	16.31	14.79	5.10	0.00	0.00	28.50	-0.82
ORTHOPEDIC SURGERY														
ALL PROCEDURES	61227	0.00	0.00	14.30	21.99	30.05	4.67	14.95	12.06	1.93	0.05	0.00	56.16	-1.23
OFFICE VISITS	21174	0.00	7.78	32.51	20.70	17.85	3.78	13.49	2.30	1.58	0.00	0.00	19.26	-2.05
HOSPITAL VISITS	12751	0.00	0.00	24.10	7.40	18.20	9.29	22.23	10.02	8.42	0.33	0.00	21.15	-0.94
SURGERY	7040	0.00	0.00	12.70	18.58	29.52	2.20	16.69	10.74	9.25	0.33	0.00	315.05	0.04
RADIOLOGY	13386	0.00	0.00	18.82	21.47	15.76	2.06	13.82	25.69	2.38	0.00	0.00	28.43	-0.84
OPHTHALMOLOGY														
ALL PROCEDURES	58247	0.00	0.00	11.13	15.14	18.34	9.06	24.78	14.30	7.25	0.00	0.00	55.57	-0.43
OFFICE VISITS	28438	0.00	0.51	5.94	15.11	17.54	6.25	35.50	11.96	7.20	0.00	0.00	18.59	-0.06
TOTAL MEDICINE	54740	0.00	0.00	5.85	13.65	22.25	8.90	35.65	10.73	2.97	0.00	0.00	22.38	-0.21
SURGERY	3221	0.00	0.00	12.48	18.04	9.75	12.11	14.59	17.26	14.44	1.33	0.00	623.47	-4.24

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	777319	0.00	0.01	12.09	20.73	25.26	4.79	22.86	10.83	3.42	0.03	0.00	24.24	-0.61
OFFICE VISITS	341782	0.00	1.04	22.29	17.61	16.48	3.82	20.33	13.36	4.86	0.22	0.00	18.22	-0.83
HOSPITAL VISITS	176528	0.00	0.27	11.85	11.27	22.53	4.38	24.39	15.50	9.41	0.40	0.00	24.40	-0.27
TOTAL MEDICINE	543426	0.00	0.01	12.51	19.74	22.72	5.01	23.01	12.54	4.41	0.06	0.00	21.40	-0.67
SURGERY	21987	0.00	0.05	8.97	11.64	24.58	9.16	21.87	13.66	9.66	0.40	0.01	200.79	-1.17
PATHOLOGY	121703	0.00	1.01	20.12	16.57	26.13	6.06	15.67	8.02	6.41	0.01	0.00	6.53	-0.32
RADIOLOGY	26095	0.00	0.01	12.97	30.81	13.97	3.00	16.43	18.03	4.76	0.02	0.00	28.31	-0.78
GENERAL PRACTICE														
ALL PROCEDURES	223962	0.00	0.00	2.81	12.02	20.66	4.99	34.94	18.80	5.68	0.09	0.00	17.29	0.20
OFFICE VISITS	121960	0.00	0.00	9.38	8.76	13.40	5.68	30.61	23.51	8.16	0.50	0.00	15.96	0.23
HOSPITAL VISITS	39877	0.00	0.00	5.44	4.51	15.36	6.41	34.05	20.33	13.00	0.88	0.00	23.29	0.62
TOTAL MEDICINE	178859	0.00	0.00	4.13	10.42	16.07	5.46	34.80	20.88	8.08	0.17	0.00	18.09	0.30
SURGERY	5755	0.00	0.00	2.33	8.34	28.32	13.64	26.83	14.58	5.91	0.02	0.03	45.10	0.84
PATHOLOGY	32875	0.00	0.49	16.91	17.41	26.79	6.54	19.05	6.74	6.03	0.05	0.00	5.99	-0.28
RADIOLOGY	6473	0.00	0.03	16.33	21.52	17.24	5.73	16.61	16.21	6.27	0.06	0.00	27.77	-0.83
GENERAL SURGERY														
ALL PROCEDURES	42996	0.00	0.00	14.22	14.75	22.20	4.82	26.26	9.82	7.93	0.00	0.00	51.20	-0.65
OFFICE VISITS	20852	0.00	0.18	13.97	11.42	13.66	6.48	32.04	13.72	7.91	0.62	0.00	17.24	-0.18
HOSPITAL VISITS	9089	0.00	0.01	8.49	7.05	23.14	7.11	27.58	16.18	9.26	1.08	0.09	23.15	0.19
SURGERY	4861	0.00	0.00	16.97	15.88	22.79	2.08	18.74	11.85	11.66	0.02	0.00	300.00	-4.00

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COST PER SERVICE
INTERNAL MEDICINE														
ALL PROCEDURES	432026	0.00	0.02	17.15	25.67	28.04	4.22	16.57	6.60	1.74	0.00	0.00	19.99	-0.97
OFFICE VISITS	166660	0.00	1.40	33.48	24.91	19.03	1.75	10.67	6.69	2.07	0.00	0.00	19.91	-1.67
HOSPITAL VISITS	120392	0.00	0.40	13.52	14.04	24.87	3.30	21.30	14.15	8.24	0.18	0.00	25.05	-0.56
TOTAL MEDICINE	327355	0.00	0.02	17.86	26.03	26.09	4.43	14.71	8.24	2.62	0.00	0.00	23.05	-1.17
SURGERY	4987	0.00	0.22	7.16	3.83	14.62	18.31	27.89	14.66	12.85	0.46	0.00	36.69	0.82
PATHOLOGY	88828	0.00	1.20	21.31	16.27	25.89	5.88	14.42	8.49	6.56	0.00	0.00	6.74	-0.33
RADIOLOGY	10856	0.00	0.01	7.76	44.59	8.56	2.07	17.58	13.87	5.55	0.00	0.00	28.45	-0.74
ORTHOPEDIC SURGERY														
ALL PROCEDURES	38954	0.00	0.00	11.92	24.13	33.09	2.37	16.10	10.30	2.09	0.00	0.00	53.86	-1.35
OFFICE VISITS	13836	0.00	7.97	35.08	20.30	17.51	4.18	10.51	2.77	1.68	0.00	0.00	19.18	-2.15
HOSPITAL VISITS	7170	0.00	0.00	23.74	7.78	22.27	7.66	18.33	10.46	9.23	0.53	0.00	21.30	-0.98
SURGERY	4482	0.00	0.00	9.68	16.82	37.22	2.70	13.30	11.56	7.92	0.80	0.00	296.22	-0.67
RADIOLOGY	8766	0.00	0.00	16.95	20.60	18.25	2.12	14.88	24.53	2.67	0.00	0.00	28.54	-0.80
OPHTHALMOLOGY														
ALL PROCEDURES	39381	0.00	0.00	7.18	19.24	16.46	12.27	26.08	13.43	5.33	0.00	0.00	51.74	-0.45
OFFICE VISITS	18474	0.00	0.36	6.40	15.18	16.20	7.01	33.70	14.01	7.13	0.01	0.00	18.27	-0.06
TOTAL MEDICINE	37212	0.00	0.00	5.72	9.13	25.06	7.97	39.29	10.34	2.50	0.00	0.00	22.77	-0.14
SURGERY	1902	0.00	0.00	11.67	19.03	14.20	4.99	19.24	17.82	11.62	1.42	0.00	623.75	-6.35

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	183315	0.00	0.09	22.60	16.37	21.42	3.90	22.44	9.05	3.99	0.14	0.00	28.64	-1.06
OFFICE VISITS	48632	0.00	1.81	31.12	15.11	13.39	4.76	17.74	10.98	4.74	0.35	0.00	19.01	-1.34
HOSPITAL VISITS	82534	0.00	0.39	17.49	9.76	21.68	5.12	24.67	14.37	5.78	0.72	0.00	24.43	-0.66
TOTAL MEDICINE	130201	0.00	0.13	20.73	17.42	18.95	3.48	24.73	9.80	4.64	0.11	0.00	23.67	-1.05
SURGERY	4710	0.00	0.28	14.95	17.22	15.90	11.51	16.16	15.20	8.43	0.36	0.00	299.96	-5.86
PATHOLOGY	22338	0.00	0.73	25.40	27.57	20.38	6.00	11.79	4.09	3.97	0.04	0.03	7.23	-0.48
RADIOLOGY	4874	0.00	0.00	16.41	40.21	9.23	2.93	8.92	20.33	1.91	0.04	0.00	28.52	-1.19
GENERAL PRACTICE														
ALL PROCEDURES	37503	0.00	0.10	8.02	6.38	18.68	5.00	37.20	14.77	9.46	0.39	0.00	19.43	0.22
OFFICE VISITS	13616	0.00	0.00	11.97	7.44	15.75	6.69	27.06	20.69	9.33	1.07	0.00	16.73	0.15
HOSPITAL VISITS	14836	0.00	0.24	8.15	2.47	13.29	6.52	38.51	15.56	12.77	2.49	0.00	23.34	0.56
TOTAL MEDICINE	32059	0.00	0.12	9.41	4.51	16.02	4.84	37.88	16.06	10.71	0.45	0.00	20.40	0.30
SURGERY	666	0.00	0.00	3.60	11.11	12.01	25.53	20.27	18.62	8.26	0.60	0.00	44.01	0.70
PATHOLOGY	4036	0.00	0.35	9.81	35.13	17.57	7.95	16.85	4.83	7.14	0.22	0.15	6.20	-0.29
RADIOLOGY	742	0.00	0.00	19.54	21.83	15.50	3.91	18.60	16.98	3.37	0.27	0.00	27.75	-0.94
GENERAL SURGERY														
ALL PROCEDURES	16566	0.00	0.07	14.48	16.66	25.65	6.86	18.10	10.64	7.06	0.49	0.00	52.21	-1.15
OFFICE VISITS	5744	0.00	0.03	13.63	14.54	10.67	12.66	24.27	18.07	5.85	0.28	0.00	18.82	-0.26
HOSPITAL VISITS	6268	0.00	0.08	8.71	9.65	11.14	14.58	30.33	15.79	6.72	3.00	0.00	22.97	0.10
SURGERY	1484	0.00	0.81	18.46	19.95	18.80	5.93	15.30	11.25	9.43	0.07	0.00	360.19	-10.08

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE														
ALL PROCEDURES	115062	0.00	0.05	27.80	19.38	22.07	3.30	18.74	6.69	1.97	0.00	0.00	22.36	-1.35
OFFICE VISITS	24254	0.00	2.18	47.46	20.45	12.31	2.21	9.12	4.30	1.95	0.02	0.00	20.28	-2.47
HOSPITAL VISITS	58986	0.00	0.47	20.32	11.94	24.58	3.74	20.85	14.02	4.01	0.06	0.00	25.01	-1.03
TOTAL MEDICINE	93589	0.00	0.09	25.41	21.15	19.94	3.08	20.17	7.60	2.56	0.00	0.00	24.84	-1.54
SURGERY	910	0.00	0.11	7.03	7.58	17.03	17.69	25.05	15.71	9.56	0.22	0.00	49.62	0.96
PATHOLOGY	18302	0.00	0.81	28.84	25.90	21.00	5.57	10.68	3.92	3.27	0.00	0.00	7.46	-0.52
RADIOLOGY	2261	0.00	0.00	11.50	52.94	6.94	4.82	6.77	15.70	1.33	0.00	0.00	29.27	-1.36
ORTHOPEDIC SURGERY														
ALL PROCEDURES	9133	0.00	0.05	23.86	21.32	19.94	1.68	18.11	13.72	1.01	0.32	0.00	65.08	-1.94
OFFICE VISITS	2738	0.00	10.59	39.08	13.08	16.33	2.30	14.35	3.80	0.44	0.04	0.00	18.54	-2.19
HOSPITAL VISITS	2444	0.00	0.00	28.64	1.72	29.58	5.65	18.49	11.99	3.93	0.00	0.00	20.61	-1.05
SURGERY	1158	0.00	0.00	19.95	25.22	18.65	3.54	9.07	18.13	4.66	0.78	0.00	359.80	-4.62
RADIOLOGY	1871	0.00	0.00	21.11	32.12	9.51	0.27	7.70	27.26	2.03	0.00	0.00	27.92	-1.08
OPHTHALMOLOGY														
ALL PROCEDURES	5051	0.00	0.97	36.96	11.98	15.70	3.94	19.05	6.71	4.63	0.06	0.00	96.89	-2.25
OFFICE VISITS	2280	0.00	2.59	6.23	8.03	14.17	3.42	41.23	14.87	9.30	0.18	0.00	20.21	0.11
TOTAL MEDICINE	4553	0.00	1.08	4.41	31.76	19.31	2.13	25.81	10.81	4.70	0.00	0.00	22.44	-0.59
SURGERY	492	0.00	0.00	22.56	16.26	3.86	16.67	13.41	14.63	12.40	0.20	0.00	786.93	-17.60

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	395392	0.00	0.01	10.88	14.39	23.58	4.10	26.18	13.46	7.34	0.07	0.00	23.07	-0.29
OFFICE VISITS	163455	0.00	0.76	17.38	12.89	16.90	5.17	23.24	15.02	8.04	0.60	0.00	17.79	-0.41
HOSPITAL VISITS	111951	0.00	0.08	12.08	8.65	20.85	6.05	24.52	16.39	10.84	0.54	0.00	24.48	-0.09
TOTAL MEDICINE	295559	0.00	0.00	10.32	14.24	21.34	4.81	26.73	14.30	8.16	0.08	0.00	21.00	-0.27
SURGERY	7381	0.00	0.00	11.68	14.25	14.48	14.02	19.02	14.28	11.52	0.75	0.00	213.44	1.57
PATHOLOGY	46663	0.00	0.53	26.91	21.71	22.05	6.46	8.39	6.39	7.32	0.23	0.01	6.60	-0.47
RADIOLOGY	10243	0.00	0.01	15.29	24.84	13.98	2.33	16.84	21.19	5.52	0.00	0.00	28.06	-0.74
GENERAL PRACTICE														
ALL PROCEDURES	166160	0.00	0.00	3.25	10.29	19.19	4.58	32.79	19.34	10.39	0.16	0.00	17.37	0.28
OFFICE VISITS	83453	0.00	0.00	9.30	8.31	13.70	6.04	29.32	21.21	11.03	1.08	0.00	16.50	0.28
HOSPITAL VISITS	31242	0.00	0.00	8.77	3.84	12.32	10.61	25.68	20.32	17.39	1.07	0.00	23.59	0.70
TOTAL MEDICINE	137149	0.00	0.00	3.38	8.85	14.22	6.66	34.15	20.13	12.44	0.17	0.00	18.54	0.42
SURGERY	2056	0.00	0.00	6.27	11.04	23.83	16.44	22.13	14.11	5.79	0.39	0.00	41.00	0.56
PATHOLOGY	22505	0.00	0.74	22.87	22.03	21.99	9.37	8.83	7.82	6.10	0.23	0.02	6.04	-0.36
RADIOLOGY	4450	0.00	0.02	17.91	19.96	12.61	3.24	15.62	26.11	4.54	0.00	0.00	27.78	-0.70
GENERAL SURGERY														
ALL PROCEDURES	28381	0.00	0.00	10.34	9.40	31.40	3.82	26.98	8.80	9.26	0.00	0.00	37.87	-0.39
OFFICE VISITS	12497	0.00	0.82	12.81	8.82	17.39	5.83	28.25	18.17	7.35	0.56	0.00	18.14	-0.18
HOSPITAL VISITS	8216	0.00	0.05	10.60	9.25	17.20	6.61	32.04	15.60	5.92	2.74	0.00	23.50	0.13
SURGERY	1840	0.00	0.00	20.71	21.96	12.23	4.62	14.08	11.20	14.84	0.38	0.00	284.40	-3.26

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER SERVICES	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG. CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE														
ALL PROCEDURES	173904	0.00	0.01	18.05	19.48	26.50	3.55	19.96	8.71	3.74	0.00	0.00	21.31	-0.85
OFFICE VISITS	55221	0.00	1.56	30.96	20.37	21.19	3.62	11.68	6.68	3.95	0.00	0.00	19.32	-1.45
HOSPITAL VISITS	69356	0.00	0.10	13.33	10.87	25.24	3.95	22.89	14.93	8.64	0.06	0.00	25.15	-0.44
TOTAL MEDICINE	145435	0.00	0.01	17.01	19.14	27.97	3.05	19.55	9.07	4.21	0.00	0.00	23.30	-0.92
SURGERY	1267	0.00	0.00	4.50	10.50	11.52	22.02	23.36	17.52	9.87	0.71	0.00	47.01	1.16
PATHOLOGY	24158	0.00	0.33	30.66	21.40	22.11	3.76	7.98	5.06	8.45	0.24	0.00	7.13	-0.58
RADIOLOGY	3044	0.00	0.00	8.28	38.27	11.33	1.68	19.19	12.98	8.28	0.00	0.00	28.11	-0.70
ORTHOPEDIC SURGERY														
ALL PROCEDURES	13134	0.00	0.11	14.02	17.26	20.09	4.85	23.70	11.64	8.31	0.02	0.00	56.79	-0.38
OFFICE VISITS	4600	0.00	5.54	28.63	12.07	20.09	8.33	21.57	2.39	1.35	0.04	0.00	19.93	-1.66
HOSPITAL VISITS	3137	0.00	0.61	21.33	5.99	18.17	5.67	29.20	11.70	7.33	0.00	0.00	21.23	-0.75
SURGERY	1393	0.00	0.00	15.65	13.42	11.99	7.32	21.03	16.51	12.78	1.29	0.00	339.98	6.20
RADIOLOGY	2749	0.00	0.00	18.81	17.86	19.13	1.60	16.22	22.34	4.04	0.00	0.00	28.45	-0.83
OPHTHALMOLOGY														
ALL PROCEDURES	13813	0.00	0.00	10.45	7.06	26.74	5.18	25.50	13.93	11.14	0.00	0.00	51.41	0.28
OFFICE VISITS	7684	0.00	0.29	8.25	15.94	18.30	3.79	33.07	10.23	10.14	0.00	0.00	18.85	-0.10
TOTAL MEDICINE	12975	0.00	0.00	8.77	16.22	22.37	5.15	28.84	11.39	7.26	0.00	0.00	21.22	-0.24
SURGERY	825	0.00	0.00	9.33	12.24	4.97	28.00	12.24	12.85	18.79	1.58	0.00	526.84	8.58

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	345967	0	1306	28128	46573	75548	22660	84686	53363	32192	1392	1	37.96	0.91
OFFICE VISITS	259193	0	2938	25439	33864	48869	11923	42764	32578	48399	11825	594	16.04	0.78
HOSPITAL VISITS	43004	1	461	4941	5080	10544	2759	10856	4409	3142	759	39	76.92	0.59
SURGERY	41689	0	736	6144	4897	7723	2729	8833	5333	4344	364	0	70.43	0.42
PATHOLOGY	66934	0	423	4839	5215	12731	5864	17901	9232	10316	294	67	10.83	0.36
RADIOLOGY	31675	0	169	5328	3486	5099	911	4527	6459	5060	556	13	14.20	0.43
GENERAL PRACTICE														
ALL PROCEDURES	108178	0	521	9140	18022	33272	10060	25039	9312	2579	122	0	24.35	-0.23
OFFICE VISITS	89819	0	1628	12077	15348	26595	6355	13046	7168	6497	1105	0	13.72	-0.20
HOSPITAL VISITS	10217	0	177	1323	1430	2909	778	2261	592	545	193	1	65.11	-1.34
SURGERY	10158	0	66	1323	1337	2448	795	2194	1023	637	17	0	14.32	-0.35
PATHOLOGY	27200	0	294	1629	2624	6046	2688	6846	3620	3204	208	16	7.08	0.20
RADIOLOGY	9438	0	107	1223	1209	1619	634	1428	1582	1514	103	9	12.66	0.37
GENERAL SURGERY														
ALL PROCEDURES	34601	0	141	3619	4250	8734	2677	8319	2839	3916	102	0	45.44	0.47
OFFICE VISITS	20283	0	193	2245	3659	5198	1634	3124	1799	2065	344	22	12.39	0.11
HOSPITAL VISITS	3894	1	67	442	444	912	365	1095	290	247	26	0	45.95	-0.26
SURGERY	13043	0	262	2019	1294	2085	301	3097	1567	2093	159	0	76.59	0.87

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	144175	0	147	9260	14564	23059	5972	39194	32786	18650	540	1	43.65	1.90
OFFICE VISITS	116091	0	540	8283	11116	9979	2561	20892	19198	34896	8455	171	19.72	1.68
HOSPITAL VISITS	26882	0	162	2907	3083	6316	1543	7003	3375	2109	346	38	87.88	1.33
SURGERY	6908	0	151	1116	1094	1523	803	978	604	509	53	0	14.37	-0.41
PATHOLOGY	39734	0	129	3210	2591	6685	3176	11055	5612	7112	86	51	13.39	0.47
RADIOLOGY	13553	0	34	2096	1534	2334	160	1540	3768	1706	323	3	13.83	0.40
ORTHOPEDIC SURGERY														
ALL PROCEDURES	20477	0	99	1294	2604	3414	727	5732	3672	2759	176	0	68.94	1.84
OFFICE VISITS	13406	0	112	570	1055	1031	663	2594	2207	3288	1485	401	14.21	1.57
HOSPITAL VISITS	2011	0	55	269	123	407	73	497	152	241	194	0	50.36	2.31
SURGERY	7129	0	73	890	551	1259	328	1952	1388	624	50	0	124.99	0.43
RADIOLOGY	8684	0	28	2009	743	1146	117	1559	1109	1840	130	1	16.46	0.54
OPHTHALMOLOGY														
ALL PROCEDURES	38536	0	398	4815	7133	7069	3224	6402	4754	4288	452	0	31.68	0.33
OFFICE VISITS	19594	0	465	2264	2686	6066	710	3108	2206	1653	436	0	9.92	0.04
SURGERY	4451	0	184	796	621	408	502	612	751	481	85	0	180.03	2.10

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	208056	7	4520	33230	25249	28454	7119	31903	34834	36687	5935	7	49.30	1.91
OFFICE VISITS	162733	22	5283	26159	17330	15144	4609	16775	17341	42807	15319	1900	20.84	1.40
HOSPITAL VISITS	21696	3	1424	4357	2482	3063	557	3515	2666	2413	1040	169	108.61	1.77
SURGERY	26481	0	1324	4970	2640	3457	1311	4410	3195	3946	662	20	88.30	0.77
PATHOLOGY	43742	0	1099	3403	2978	6358	2982	9426	6665	9880	735	165	14.42	0.71
RADIOLOGY	20487	0	1327	3726	1719	1731	340	1465	3213	6108	707	97	17.79	0.79
GENERAL PRACTICE														
ALL PROCEDURES	57170	7	1627	13426	10124	11784	1868	8525	5283	4236	198	3	33.43	-0.62
OFFICE VISITS	49949	22	2881	12999	8805	8117	1933	4365	3969	5556	1302	0	10.24	-0.46
HOSPITAL VISITS	5006	1	358	1368	715	1076	186	644	204	236	199	13	89.61	-3.95
SURGERY	6828	0	129	1203	838	1337	476	1250	735	558	47	0	17.97	-0.56
PATHOLOGY	15728	0	579	1135	1107	2460	921	3685	2157	3059	560	42	10.20	0.47
RADIOLOGY	5374	0	236	1060	403	553	231	402	592	1641	237	10	16.86	0.80
GENERAL SURGERY														
ALL PROCEDURES	18554	0	538	3461	2321	3108	312	3381	1887	3287	243	1	63.83	1.20
OFFICE VISITS	11212	0	511	2874	1160	1762	682	1028	1086	1586	411	71	16.44	0.26
HOSPITAL VISITS	1710	2	135	464	110	282	74	311	134	112	75	10	65.22	-0.80
SURGERY	7646	0	336	1282	769	713	165	1231	858	1741	358	4	102.98	2.03

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	93239	0	744	10291	6638	9757	2486	15434	22112	21753	4020	1	54.02	3.58
OFFICE VISITS	80432	0	1103	7317	5275	2844	1018	8946	10500	30642	11434	1350	24.59	2.77
HOSPITAL VISITS	13831	0	785	2438	1529	1620	254	2377	2210	1864	691	63	124.24	3.90
SURGERY	4877	0	334	1139	529	777	514	500	540	421	51	16	16.06	-0.67
PATHOLOGY	28014	0	520	2268	1871	3898	2061	5741	4508	6821	175	123	16.79	0.34
RADIOLOGY	9418	0	622	1341	1054	645	107	531	1956	2728	305	86	16.68	0.68
ORTHOPEDIC SURGERY														
ALL PROCEDURES	12800	0	244	1754	1124	1312	276	2367	2615	2476	630	2	89.35	3.29
OFFICE VISITS	8715	0	57	572	356	412	228	1057	931	3095	1528	479	18.59	2.73
HOSPITAL VISITS	1149	0	146	87	128	85	43	183	118	201	75	83	67.77	4.89
SURGERY	4469	0	197	687	343	404	85	1123	736	805	74	0	159.54	0.54
RADIOLOGY	5695	0	469	1325	262	533	2	532	665	1739	165	1	20.51	0.98
OPHTHALMOLOGY														
ALL PROCEDURES	26293	0	1367	4298	5042	2493	2177	2196	2937	4935	844	0	37.31	0.54
OFFICE VISITS	12425	0	731	2397	1734	2009	748	1379	855	1928	644	0	12.57	0.07
SURGERY	2661	0	328	659	161	226	71	306	326	421	132	0	239.37	3.63

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	37426	0	44	7037	5212	7740	1975	8907	4261	2070	58	0	28.06	-1.04
OFFICE VISITS	23477	0	420	6762	3758	3254	1004	4407	2648	1144	68	0	7.88	-0.56
HOSPITAL VISITS	8891	0	41	1340	775	2003	501	2275	1326	563	59	0	45.35	-1.23
SURGERY	6247	0	27	915	850	964	626	967	812	519	23	0	45.23	-0.88
PATHOLOGY	6130	0	37	1242	1534	1362	486	778	292	336	4	3	5.27	-0.15
RADIOLOGY	3598	0	0	535	1411	317	135	314	788	88	1	0	7.73	-0.32
GENERAL PRACTICE														
ALL PROCEDURES	7957	0	1	672	480	1267	524	2744	1408	807	28	0	18.32	0.21
OFFICE VISITS	5795	0	0	680	431	851	379	1518	1273	609	50	0	7.86	0.07
HOSPITAL VISITS	1627	0	1	110	53	199	88	648	259	223	42	0	42.57	1.02
SURGERY	873	0	0	31	74	95	168	159	101	56	5	0	6.71	0.11
PATHOLOGY	1723	0	11	153	531	338	173	273	85	137	4	3	2.91	-0.14
RADIOLOGY	585	0	0	115	137	83	27	89	107	22	1	0	7.04	-0.24
GENERAL SURGERY														
ALL PROCEDURES	5906	0	11	775	780	1331	530	1147	641	605	9	0	29.29	-0.64
OFFICE VISITS	2838	0	2	368	389	379	217	788	515	159	13	0	7.62	-0.11
HOSPITAL VISITS	967	0	2	87	83	136	135	284	159	66	14	0	29.78	0.14
SURGERY	2572	0	26	469	369	439	146	418	255	241	1	0	41.56	-1.16

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	17528	0	14	4211	2951	4050	700	3789	1405	402	1	0	29.36	-1.77
OFFICE VISITS	11504	0	205	4941	2565	1493	311	1153	606	228	2	0	8.55	-1.04
HOSPITAL VISITS	5902	0	38	1039	628	1551	254	1278	858	250	3	0	50.00	-2.07
SURGERY	911	0	1	69	58	168	135	195	136	82	2	0	9.91	0.19
PATHOLOGY	4407	0	26	1089	1003	1024	313	505	207	199	0	0	6.19	-0.44
RADIOLOGY	1754	0	0	177	872	124	104	126	316	30	0	0	7.55	-0.35
ORTHOPEDIC SURGERY														
ALL PROCEDURES	3134	0	2	601	648	574	47	660	528	53	17	0	37.93	-1.13
OFFICE VISITS	1783	0	191	669	242	313	47	261	49	10	1	0	5.69	-0.67
HOSPITAL VISITS	395	0	0	104	11	117	24	65	50	24	0	0	25.51	-1.30
SURGERY	1198	0	0	197	250	229	44	138	230	66	14	0	69.56	-0.39
RADIOLOGY	1259	0	0	243	402	110	4	99	365	36	0	0	8.30	-0.32
OPHTHALMOLOGY														
ALL PROCEDURES	2901	0	16	778	353	518	174	567	279	203	3	0	33.74	-0.78
OFFICE VISITS	1557	0	22	104	131	218	50	687	205	138	2	0	5.92	0.03
SURGERY	693	0	0	149	99	33	133	57	90	74	1	0	111.74	-2.50

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	106003	0	13	8520	13476	23720	4908	29907	15845	9420	106	0	17.21	-0.21
OFFICE VISITS	75891	0	566	12531	10213	13179	3933	17853	11121	6028	463	0	7.66	-0.18
HOSPITAL VISITS	13106	0	17	1386	1114	2705	820	3318	2103	1559	75	0	41.82	-0.15
SURGERY	9203	0	0	957	1231	1323	1125	1629	1207	1091	94	0	34.24	0.27
PATHOLOGY	17647	0	132	3501	4257	4010	1477	1645	1080	1462	49	3	3.49	-0.25
RADIOLOGY	7753	0	1	1134	1926	1057	186	1310	1662	464	0	0	7.41	-0.19
GENERAL PRACTICE														
ALL PROCEDURES	44569	0	0	1017	4179	7274	2373	15205	9372	5008	104	0	12.95	0.21
OFFICE VISITS	35020	0	0	2756	2872	4921	2147	10339	7617	3950	418	0	7.87	0.14
HOSPITAL VISITS	3722	0	0	221	130	510	347	1039	726	708	40	0	39.60	1.18
SURGERY	2494	0	0	129	256	542	395	463	331	157	12	0	6.76	0.09
PATHOLOGY	9897	0	101	1761	2327	2083	1057	1007	666	848	21	3	2.75	-0.16
RADIOLOGY	3508	0	1	645	704	446	111	539	895	167	0	0	7.05	-0.18
GENERAL SURGERY														
ALL PROCEDURES	10661	0	0	953	1006	2917	444	3001	1154	1143	0	0	20.16	-0.21
OFFICE VISITS	6454	0	62	806	615	1188	427	1688	1200	421	43	0	7.02	-0.07
HOSPITAL VISITS	1255	0	2	134	107	167	92	410	214	92	32	0	30.76	0.17
SURGERY	2909	0	0	485	533	387	129	440	276	406	22	0	35.98	-0.41

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	36230	0	6	5133	6840	9941	1447	7890	3287	1681	0	0	20.45	-0.82
OFFICE VISITS	25671	0	328	7631	5401	5443	858	3308	1663	1039	0	0	8.31	-0.62
HOSPITAL VISITS	7646	0	11	941	827	1940	352	1747	1104	718	3	0	45.62	-0.80
SURGERY	1145	0	0	42	115	127	204	280	186	132	12	0	10.40	0.26
PATHOLOGY	7750	0	31	1740	1930	1927	420	638	414	614	28	0	4.44	-0.36
RADIOLOGY	2431	0	0	167	890	265	47	484	339	226	0	0	7.04	-0.18
ORTHOPEDIC SURGERY														
ALL PROCEDURES	4922	0	7	539	767	1021	194	1248	704	438	2	0	30.31	-0.20
OFFICE VISITS	3049	0	156	895	385	566	262	670	65	48	2	0	6.01	-0.50
HOSPITAL VISITS	483	0	4	90	50	88	29	122	59	41	0	0	27.58	-0.97
SURGERY	1522	0	0	183	205	199	113	304	278	195	27	0	62.23	1.13
RADIOLOGY	1814	0	0	322	332	346	28	287	428	71	0	0	8.62	-0.25
OPHTHALMOLOGY														
ALL PROCEDURES	9621	0	0	878	684	2567	450	2563	1328	1150	0	0	14.76	0.08
OFFICE VISITS	5697	0	20	443	940	1061	239	1848	576	570	0	0	5.09	-0.03
SURGERY	1133	0	0	118	122	68	284	142	136	201	21	0	76.72	1.25

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES													
ALL PROCEDURES	0	74	171799	259765	324530	63825	329436	147407	58906	302	0	24.50	-0.57
OFFICE VISITS	0	5305	121310	86233	92366	20667	123155	72941	30564	1328	0	18.16	-0.75
HOSPITAL VISITS	0	261	48703	37889	79966	17863	93684	58100	32910	1637	0	24.43	-0.30
TOTAL MEDICINE	0	102	120493	183241	204759	52762	235986	122214	49367	262	0	21.58	-0.57
SURGERY	0	21	3373	4592	7395	2784	7905	4522	3403	100	2	217.12	-1.20
PATHOLOGY	0	371	44920	36349	44899	12592	25823	13913	11837	0	0	6.63	-0.37
RADIOLOGY	0	3	5855	12349	5379	1238	6427	8214	1747	0	0	28.27	-0.82
GENERAL PRACTICE													
ALL PROCEDURES	0	0	15008	46802	83532	19509	158796	72518	31190	271	0	17.51	0.23
OFFICE VISITS	0	0	20681	17762	31548	9729	71733	46271	20147	1158	0	16.21	0.25
HOSPITAL VISITS	0	0	5865	3473	11466	6024	29205	16439	12636	847	0	23.41	0.64
TOTAL MEDICINE	0	0	14717	34328	53133	19338	123569	69125	33595	262	0	18.48	0.35
SURGERY	0	0	179	847	2262	892	2601	1226	465	4	2	44.01	0.76
PATHOLOGY	0	352	10648	14145	13185	4396	8643	4288	3759	0	0	6.02	-0.31
RADIOLOGY	0	2	2012	2433	1693	595	1941	2384	605	0	0	27.77	-0.79
GENERAL SURGERY													
ALL PROCEDURES	0	0	11641	10973	24939	3148	22085	8283	6881	2	0	47.09	-0.66
OFFICE VISITS	0	166	5181	3639	6347	2230	12573	5947	2841	169	0	17.76	-0.19
HOSPITAL VISITS	0	0	2085	2319	3784	1790	7420	3966	1641	568	0	23.22	0.15
SURGERY	0	6	1478	1441	1505	263	1539	934	1023	5	0	307.07	-4.93

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
INTERNAL MEDICINE													
ALL PROCEDURES	0	74	129913	179704	186977	33028	124972	50894	15430	0	0	20.69	-1.00
OFFICE VISITS	0	3347	86875	56153	45703	6131	25897	16835	5194	0	0	19.81	-1.70
HOSPITAL VISITS	0	261	37680	31153	62395	8865	54224	36417	17559	180	0	25.07	-0.64
TOTAL MEDICINE	0	102	102575	141439	139446	28554	92902	47216	14145	0	0	23.41	-1.17
SURGERY	0	15	420	415	1236	1084	2120	1050	799	25	0	40.15	0.70
PATHOLOGY	0	19	34272	22204	31714	8196	17180	9625	8078	0	0	6.91	-0.40
RADIOLOGY	0	1	1324	7042	1576	367	2636	2391	824	0	0	28.50	-0.82
ORTHOPEDIC SURGERY													
ALL PROCEDURES	0	0	8754	13466	18400	2861	9152	7384	1181	29	0	56.16	-1.73
OFFICE VISITS	0	1647	6884	4383	3780	801	2857	487	335	0	0	19.26	-2.05
HOSPITAL VISITS	0	0	3073	944	2321	1184	2835	1278	1074	42	0	21.15	-0.94
SURGERY	0	0	894	1308	2078	155	1175	756	651	23	0	315.05	0.04
RADIOLOGY	0	0	2519	2874	2110	276	1850	3439	318	0	0	28.43	-0.84
OPHTHALMOLOGY													
ALL PROCEDURES	0	0	6483	8820	10682	5279	14431	8328	4224	0	0	55.57	-0.43
OFFICE VISITS	0	145	1689	4296	4988	1776	10095	3401	2047	1	0	18.59	-0.06
TOTAL MEDICINE	0	0	3201	7474	12180	4870	19515	5873	1627	0	0	22.38	-0.21
SURGERY	0	0	402	581	314	390	470	556	465	43	0	623.47	-4.24

TABLE 3
DISTRIBUTION OF SERVICES BY PERCENTAGE CHANGE IN PROGRAM EXPENDITURES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	PROGRAM COSTS PER SERVICE	AVG CHANGE IN COSTS PER SERVICE
TOTAL FIVE SPECIALTIES													
ALL PROCEDURES	0	75	93988	161139	196319	37238	177665	84147	26546	202	0	24.24	-0.61
OFFICE VISITS	0	3541	76183	60196	56325	13062	69482	45658	16600	735	0	18.22	-0.83
HOSPITAL VISITS	0	478	20926	19901	39766	7730	43050	27364	16605	700	8	24.40	-0.27
TOTAL MEDICINE	0	67	67962	107256	123473	27226	125026	68160	23951	305	0	21.40	-0.62
SURGERY	0	11	1972	2559	5405	2015	4808	3003	2124	88	2	200.79	-1.17
PATHOLOGY	0	1226	24483	20172	31804	7372	19068	9757	7805	15	1	6.53	-0.32
RADIOLOGY	0	3	3385	8040	3645	782	4288	4705	1243	4	0	28.31	-0.78
GENERAL PRACTICE													
ALL PROCEDURES	0	2	6302	26920	46274	11178	78263	42103	12720	200	0	17.29	0.20
OFFICE VISITS	0	0	11442	10688	16343	6923	37333	28672	9955	604	0	15.96	0.23
HOSPITAL VISITS	0	0	2171	1800	6126	2558	13580	8107	5186	349	0	23.29	0.62
TOTAL MEDICINE	0	2	7378	18638	28734	9766	62237	37341	14458	305	0	18.09	0.30
SURGERY	0	0	134	480	1630	785	1544	839	340	1	2	45.10	0.84
PATHOLOGY	0	160	5558	5722	8008	2151	6263	2216	1981	15	1	5.99	-0.28
RADIOLOGY	0	2	1057	1393	1116	371	1075	1049	406	4	0	27.77	-0.83
GENERAL SURGERY													
ALL PROCEDURES	0	1	6115	6343	9543	2074	11289	4221	3408	2	0	51.20	-0.65
OFFICE VISITS	0	37	2913	2381	2849	1352	6681	2861	1649	129	0	17.24	-0.18
HOSPITAL VISITS	0	1	772	641	2103	646	2507	1471	842	98	8	23.15	0.19
SURGERY	0	0	825	772	1108	101	911	576	567	1	0	300.00	-4.00

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	345849	0.00	0.38	8.13	13.47	21.84	6.55	24.49	15.43	9.31	0.40	0.00	37.96	0.91
OFFICE VISITS	259193	0.00	1.13	9.81	13.07	18.85	4.60	16.50	12.57	18.67	4.56	0.23	16.04	0.78
HOSPITAL VISITS	42991	0.00	1.07	11.49	11.82	24.53	6.42	25.25	10.26	7.31	1.77	0.09	76.92	0.59
SURGERY	41103	0.00	1.79	14.95	11.91	18.79	6.64	21.49	12.97	10.57	0.89	0.00	70.43	0.42
PATHOLOGY	66882	0.00	0.63	7.24	7.80	19.04	8.77	26.77	13.80	15.42	0.44	0.10	10.83	0.36
RADIOLOGY	31608	0.00	0.53	16.86	11.03	16.13	2.88	14.32	20.43	16.01	1.76	0.04	14.20	0.43
GENERAL PRACTICE														
ALL PROCEDURES	108067	0.00	0.48	8.46	16.68	30.79	9.31	23.17	8.62	2.39	0.11	0.00	24.35	-0.23
OFFICE VISITS	89819	0.00	1.81	13.45	17.09	29.61	7.08	14.52	7.98	7.23	1.23	0.00	13.72	-0.20
HOSPITAL VISITS	10209	0.00	1.73	12.96	14.01	28.49	7.62	22.15	5.80	5.34	1.89	0.01	65.11	-1.34
SURGERY	9840	0.00	0.67	13.45	13.59	24.88	8.08	22.30	10.40	6.47	0.17	0.00	14.32	-0.35
PATHOLOGY	27175	0.00	1.08	5.99	9.66	22.25	9.89	25.19	13.32	11.79	0.77	0.06	7.08	0.20
RADIOLOGY	9428	0.00	1.13	12.97	12.82	17.17	6.72	15.15	16.78	16.06	1.09	0.10	12.66	0.37
GENERAL SURGERY														
ALL PROCEDURES	34597	0.00	0.41	10.46	12.28	25.24	7.74	24.05	8.21	11.32	0.29	0.00	45.44	0.47
OFFICE VISITS	20283	0.00	0.95	11.07	18.04	25.63	8.06	15.40	8.87	10.18	1.70	0.11	12.39	0.11
HOSPITAL VISITS	3889	0.03	1.72	11.37	11.42	23.45	9.39	28.16	7.46	6.35	0.67	0.00	45.95	-0.26
SURGERY	12877	0.00	2.03	15.68	10.05	16.19	2.34	24.05	12.17	16.25	1.23	0.00	76.59	0.87

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MEDICARE TOTAL

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	144173	0.00	0.10	6.42	10.10	15.99	4.14	27.19	22.74	12.94	0.37	0.00	43.65	1.90
OFFICE VISITS	116091	0.00	0.47	7.13	9.58	8.60	2.21	18.00	16.54	30.06	7.28	0.15	19.72	1.68
HOSPITAL VISITS	26882	0.00	0.60	10.81	11.47	23.50	5.74	26.05	12.55	7.95	1.29	0.14	87.88	1.33
SURGERY	6831	0.00	2.21	16.34	16.02	22.30	11.76	14.32	8.84	7.45	0.78	0.00	14.37	-0.41
PATHOLOGY	39707	0.00	0.32	8.08	6.53	16.84	8.00	27.84	14.13	17.91	0.22	0.13	13.39	0.47
RADIOLOGY	13498	0.00	0.25	15.53	11.36	17.29	1.19	11.41	27.92	12.64	2.39	0.02	13.83	0.40
ORTHOPEDIC SURGERY														
ALL PROCEDURES	20477	0.00	0.48	6.32	12.72	16.67	3.55	27.99	17.93	13.47	0.86	0.00	68.94	1.84
OFFICE VISITS	13406	0.00	0.84	4.25	7.87	7.69	4.95	19.35	16.46	24.53	11.08	2.99	14.21	1.57
HOSPITAL VISITS	2011	0.00	2.73	13.38	6.12	20.24	3.63	24.71	7.56	11.98	9.65	0.00	50.36	2.31
SURGERY	7115	0.00	1.03	12.51	7.74	17.70	4.61	27.43	19.51	8.77	0.70	0.00	124.99	0.43
RADIOLOGY	8682	0.00	0.32	23.14	8.56	13.20	1.35	17.96	12.77	21.19	1.50	0.01	16.46	0.54
OPHTHALMOLOGY														
ALL PROCEDURES	38535	0.00	1.03	12.50	18.51	18.34	8.37	16.61	12.34	11.13	1.17	0.00	31.68	0.33
OFFICE VISITS	19594	0.00	2.37	11.55	13.71	30.96	3.62	15.86	11.26	8.44	2.23	0.00	9.92	0.04
SURGERY	4440	0.00	4.14	17.93	13.99	9.19	11.31	13.78	16.91	10.83	1.91	0.00	180.03	2.10

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	207945	0.00	2.17	15.98	12.14	13.68	3.42	15.34	16.75	17.64	2.85	0.00	49.30	1.91
OFFICE VISITS	162689	0.01	3.25	16.08	10.65	9.31	2.83	10.31	10.66	26.31	9.42	1.17	20.84	1.40
HOSPITAL VISITS	21689	0.01	6.57	20.09	11.44	14.12	2.57	16.21	12.29	11.13	4.80	0.78	108.61	1.77
SURGERY	25935	0.00	5.11	19.16	10.18	13.33	5.05	17.00	12.32	15.21	2.55	0.08	88.30	0.77
PATHOLOGY	43691	0.00	2.52	7.79	6.82	14.55	6.83	21.57	15.25	22.61	1.68	0.38	14.42	0.71
RADIOLOGY	20433	0.00	6.49	18.24	8.41	8.47	1.66	7.17	15.72	29.89	3.46	0.47	17.79	0.79
GENERAL PRACTICE														
ALL PROCEDURES	57081	0.01	2.85	23.52	17.74	20.64	3.27	14.93	9.26	7.42	0.35	0.01	33.43	-0.62
OFFICE VISITS	49949	0.04	5.77	26.02	17.63	16.25	3.87	8.74	7.95	11.12	2.61	0.00	18.24	-0.46
HOSPITAL VISITS	5000	0.02	7.16	27.36	14.30	21.52	3.72	12.88	4.08	4.72	3.98	0.26	89.61	-3.95
SURGERY	6573	0.00	1.96	18.30	12.75	20.34	7.24	19.02	11.18	8.49	0.72	0.00	17.97	-0.56
PATHOLOGY	15705	0.00	3.69	7.23	7.05	15.66	5.86	23.46	13.73	19.48	3.57	0.27	10.20	0.47
RADIOLOGY	5365	0.00	4.40	19.76	7.51	10.31	4.31	7.49	11.03	30.59	4.42	0.19	16.86	0.30
GENERAL SURGERY														
ALL PROCEDURES	18539	0.00	2.90	18.67	12.52	16.76	1.68	18.24	10.18	17.73	1.31	0.01	63.83	1.20
OFFICE VISITS	11171	0.00	4.57	25.73	10.38	15.77	6.11	9.20	9.72	14.20	3.68	0.64	16.44	0.26
HOSPITAL VISITS	1709	0.12	7.90	27.15	6.44	16.50	4.33	18.20	7.84	6.55	4.39	0.59	65.22	-0.90
SURGERY	7457	0.00	4.51	17.19	10.31	9.56	2.21	16.51	11.51	23.35	4.80	0.05	102.98	2.03

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
NON-ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	93236	0.00	0.80	11.04	7.12	10.46	2.67	16.55	23.72	23.33	4.31	0.00	54.02	3.58
OFFICE VISITS	80429	0.00	1.37	9.10	6.56	3.54	1.27	11.12	13.05	38.10	14.22	1.68	24.59	2.77
HOSPITAL VISITS	13831	0.00	5.68	17.63	11.05	11.71	1.84	17.19	15.98	13.48	5.00	0.46	124.24	3.90
SURGERY	4821	0.00	6.93	23.63	10.97	16.12	10.66	10.37	11.20	8.73	1.06	0.33	16.06	-0.67
PATHOLOGY	27986	0.00	1.86	8.10	6.69	13.93	7.36	20.51	16.11	24.37	0.63	0.44	16.79	0.84
RADIOLOGY	9375	0.00	6.63	14.30	11.24	6.88	1.14	5.66	20.86	29.10	3.25	0.92	16.68	0.68
CRTHOPEDIC SURGERY														
ALL PROCEDURES	12800	0.00	1.91	13.70	8.78	10.25	2.16	18.49	20.43	19.34	4.92	0.02	89.35	3.29
OFFICE VISITS	8715	0.00	0.65	6.56	4.08	4.73	2.62	12.13	10.68	35.51	17.53	5.50	18.59	2.73
HOSPITAL VISITS	1149	0.00	12.71	7.57	11.14	7.40	3.74	15.93	10.27	17.49	6.53	7.22	67.77	4.89
SURGERY	4454	0.00	4.42	15.42	7.70	9.07	1.91	25.21	16.52	18.07	1.66	0.00	159.54	0.54
RADIOLOGY	5693	0.00	8.24	23.27	4.60	9.36	0.04	9.34	11.68	30.55	2.90	0.02	20.51	0.98
OPHTHALMOLOGY														
ALL PROCEDURES	26289	0.00	5.20	16.35	19.18	9.48	8.28	8.35	11.17	18.77	3.21	0.00	37.31	0.54
OFFICE VISITS	12425	0.00	5.88	19.29	13.96	16.17	6.02	11.10	6.88	15.52	5.18	0.00	12.57	0.07
SURGERY	2630	0.00	12.47	25.06	6.12	8.59	2.70	11.63	12.40	16.01	5.02	0.00	239.37	3.63

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES
RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	37304	0.00	0.12	18.86	13.97	20.75	5.29	23.88	11.42	5.55	0.16	0.00	28.06	-1.04
OFFICE VISITS	23465	0.00	1.79	28.82	16.02	13.87	4.28	18.78	11.28	4.88	0.29	0.00	7.88	-0.56
HOSPITAL VISITS	8883	0.00	0.46	15.08	8.72	22.55	5.64	25.61	14.93	6.34	0.66	0.00	45.35	-1.23
SURGERY	5703	0.00	0.47	16.04	14.90	16.90	10.98	16.96	14.24	9.10	0.40	0.00	45.23	-0.88
PATHOLOGY	6074	0.00	0.61	20.45	25.26	22.42	8.00	12.81	4.81	5.53	0.07	0.05	5.27	-0.35
RADIOLOGY	3589	0.00	0.00	14.91	39.31	8.83	3.76	8.75	21.96	2.45	0.03	0.00	7.73	-0.32
GENERAL PRACTICE														
ALL PROCEDURES	7931	0.00	0.01	8.47	6.05	15.98	6.61	34.60	17.75	10.18	0.35	0.00	18.32	0.21
OFFICE VISITS	5791	0.00	0.00	11.74	7.44	14.70	6.54	26.21	21.98	10.52	0.86	0.00	7.86	0.07
HOSPITAL VISITS	1623	0.00	0.06	6.78	3.27	12.26	5.42	39.93	15.96	13.74	2.59	0.00	42.57	1.07
SURGERY	689	0.00	0.00	4.50	10.74	13.79	24.38	23.08	14.66	8.13	0.73	0.00	6.71	0.11
PATHOLOGY	1708	0.00	0.64	8.96	31.09	19.79	10.13	15.98	4.98	8.02	0.23	0.18	2.91	-0.14
RADIOLOGY	581	0.00	0.00	19.79	23.58	14.29	4.65	15.32	18.42	3.79	0.17	0.00	7.04	-0.24
GENERAL SURGERY														
ALL PROCEDURES	5829	0.00	0.19	13.30	13.38	22.83	9.09	19.68	11.00	10.38	0.15	0.00	29.29	-0.64
OFFICE VISITS	2830	0.00	0.07	13.00	13.75	13.39	7.67	27.84	18.20	5.62	0.46	0.00	7.62	-0.11
HOSPITAL VISITS	966	0.00	0.21	9.01	8.59	14.08	13.98	29.40	16.46	6.83	1.45	0.00	29.78	0.14
SURGERY	2364	0.00	1.10	19.84	15.61	18.57	6.18	17.68	10.79	10.19	0.04	0.00	41.56	-1.16

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
VOLUNTARY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	17523	0.00	0.08	24.03	16.84	23.11	3.99	21.62	8.02	2.29	0.01	0.00	29.36	-1.77
OFFICE VISITS	11504	0.00	1.78	42.95	22.30	12.98	2.70	10.02	5.27	1.98	0.02	0.00	8.55	-1.04
HOSPITAL VISITS	5899	0.00	0.64	17.61	10.65	26.29	4.31	21.66	14.54	4.24	0.05	0.00	50.00	-2.07
SURGERY	846	0.00	0.12	8.16	6.86	19.86	15.96	23.05	16.08	9.69	0.24	0.00	9.91	0.19
PATHOLOGY	4366	0.00	0.60	24.94	22.97	23.45	7.17	11.57	4.74	4.56	0.00	0.00	6.19	-0.44
RADIOLOGY	1749	0.00	0.00	10.12	49.86	7.09	5.95	7.20	18.07	1.72	0.00	0.00	7.55	-0.35
ORTHOPEDIC SURGERY														
ALL PROCEDURES	3130	0.00	0.06	19.20	20.70	18.34	1.50	21.09	16.87	1.69	0.54	0.00	37.93	-1.13
OFFICE VISITS	1783	0.00	10.71	37.52	13.57	17.55	2.64	14.64	2.75	0.56	0.06	0.00	5.69	-0.67
HOSPITAL VISITS	395	0.00	0.00	26.33	2.78	29.62	6.08	16.46	12.66	6.08	0.00	0.00	25.51	-1.30
SURGERY	1168	0.00	0.00	16.87	21.40	19.61	3.77	11.82	19.69	5.65	1.20	0.00	69.56	-0.89
RADIOLOGY	1259	0.00	0.00	19.30	31.93	8.74	0.32	7.86	28.99	2.86	0.00	0.00	8.30	-0.32
OPHTHALMOLOGY														
ALL PROCEDURES	2891	0.00	0.55	26.91	12.21	17.92	6.02	19.61	9.65	7.02	0.10	0.00	33.74	-0.78
OFFICE VISITS	1557	0.00	1.41	6.68	8.41	14.00	3.21	44.12	13.17	8.86	0.13	0.00	5.92	0.03
SURGERY	636	0.00	0.00	23.43	15.57	5.19	20.91	8.96	14.15	11.64	0.16	0.00	111.74	-2.50

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
TOTAL FIVE SPECIALTIES														
ALL PROCEDURES	105915	0.00	0.01	8.04	12.72	22.40	4.63	28.24	14.96	8.89	0.10	0.00	17.21	-0.21
OFFICE VISITS	75887	0.00	0.75	16.51	13.46	17.37	5.18	23.53	14.65	7.94	0.61	0.00	7.66	-0.18
HOSPITAL VISITS	13097	0.00	0.13	10.58	8.51	20.65	6.26	25.33	16.06	11.90	0.57	0.00	41.82	-0.15
SURGERY	8657	0.00	0.00	11.05	14.22	15.28	13.00	18.82	13.94	12.60	1.09	0.00	34.24	0.27
PATHOLOGY	17616	0.00	0.75	19.87	24.17	22.76	8.38	9.34	6.13	8.30	0.28	0.02	3.49	-0.25
RADIOLOGY	7740	0.00	0.01	14.65	24.88	13.66	2.40	16.93	21.47	5.99	0.00	0.00	7.41	-0.19
GENERAL PRACTICE														
ALL PROCEDURES	44532	0.00	0.00	2.28	9.38	16.33	5.33	34.14	21.05	11.25	0.23	0.00	12.95	0.21
OFFICE VISITS	35020	0.00	0.00	7.87	8.20	14.05	6.13	29.52	21.75	11.28	1.19	0.00	7.87	0.14
HOSPITAL VISITS	3721	0.00	0.00	5.94	3.49	13.71	9.33	27.92	19.51	19.03	1.07	0.00	39.60	1.18
SURGERY	2285	0.00	0.00	5.65	11.20	23.72	17.29	20.26	14.49	6.87	0.53	0.00	6.76	0.09
PATHOLOGY	9874	0.00	1.02	17.83	23.57	21.10	10.70	10.20	6.74	8.59	0.21	0.03	2.75	-0.16
RADIOLOGY	3508	0.00	0.03	18.39	20.07	12.71	3.16	15.36	25.51	4.76	0.00	0.00	7.05	-0.18
GENERAL SURGERY														
ALL PROCEDURES	10618	0.00	0.00	8.98	9.47	27.47	4.18	28.26	10.87	10.76	0.00	0.00	20.16	-0.21
OFFICE VISITS	6450	0.00	0.96	12.50	9.53	18.42	6.62	26.17	18.60	6.53	0.67	0.00	7.02	-0.07
HOSPITAL VISITS	1250	0.00	0.16	10.72	8.56	13.36	7.36	32.80	17.12	7.36	2.56	0.00	30.76	0.17
SURGERY	2678	0.00	0.00	18.11	19.90	14.45	4.82	16.43	10.31	15.16	0.82	0.00	35.98	-0.41

TABLE 4
DISTRIBUTION OF PATIENTS BY PERCENTAGE CHANGE IN PATIENT LIABILITIES RESULTING FROM IMPLEMENTATION OF A STATEWIDE FEE SCHEDULE
MANDATORY ASSIGNED

SPECIALTY/PROCEDURE GROUP	TOTAL NUMBER PATIENTS	>-50%	-50% TO -26%	-25% TO -11%	-10% TO -6%	-5% TO -1%	0%	1% TO 5%	6% TO 10%	11% TO 25%	26% TO 50%	>50%	LIABILITY PER PATIENT	AVG. CHANGE LIABILITY PER PATIENT
INTERNAL MEDICINE														
ALL PROCEDURES	36225	0.00	0.02	14.17	18.88	27.44	3.99	21.78	9.07	4.64	0.00	0.00	20.45	-0.92
OFFICE VISITS	25671	0.00	1.28	29.73	21.04	21.20	3.34	12.89	6.48	4.05	0.00	0.00	8.31	-0.62
HOSPITAL VISITS	7643	0.00	0.14	12.31	10.82	25.38	4.61	22.86	14.44	9.39	0.04	0.00	45.62	-0.80
SURGERY	1098	0.00	0.00	3.83	10.47	11.57	18.58	25.50	16.94	12.02	1.09	0.00	10.40	0.26
PATHOLOGY	7742	0.00	0.40	22.47	24.93	24.89	5.42	8.24	5.35	7.93	0.36	0.00	4.44	-0.36
RADIOLOGY	2418	0.00	0.00	6.91	36.81	10.96	1.94	20.02	14.02	9.35	0.00	0.00	7.04	-0.18
ORTHOPEDIC SURGERY														
ALL PROCEDURES	4920	0.00	0.14	10.96	15.59	20.75	3.94	25.37	14.31	8.90	0.04	0.00	30.31	-0.20
OFFICE VISITS	3049	0.00	5.12	29.35	12.63	18.56	8.59	21.97	2.13	1.57	0.07	0.00	6.01	-0.50
HOSPITAL VISITS	483	0.00	0.83	18.63	10.35	18.22	6.00	25.26	12.22	8.49	0.00	0.00	27.58	-0.97
SURGERY	1504	0.00	0.00	12.17	13.63	13.23	7.51	20.21	18.48	12.97	1.80	0.00	62.23	1.13
RADIOLOGY	1814	0.00	0.00	17.75	18.30	19.07	1.54	15.82	23.59	3.91	0.00	0.00	8.62	-0.25
OPHTHALMOLOGY														
ALL PROCEDURES	9620	0.00	0.00	9.13	7.11	26.68	4.68	26.64	13.80	11.95	0.00	0.00	14.76	0.08
OFFICE VISITS	5697	0.00	0.35	7.78	16.50	18.62	4.20	32.44	10.11	10.01	0.00	0.00	5.09	-0.33
SURGERY	1092	0.00	0.00	10.81	11.17	6.23	26.01	13.00	12.45	18.41	1.92	0.00	76.72	1.25

one. Internists appear to be the largest losers, with a revenue decline of 1.64 percent. Program expenditures to internists are estimated to decrease by 4.61 percent, while beneficiary liability would increase by 4.54 percent. General practitioners, however, would remain fairly constant in terms of total revenues, with program expenditures to GPs increasing by 1.4 percent.

The largest percentage change in program expenditures occurs among voluntary assigned services. Program expenditures for voluntary assigned services are estimated to decline by 3.6 percent. Internists' revenues from voluntary assigned services would decline by 5.7 percent, with both internists and orthopedic surgeons experiencing a decline in voluntary assigned office visit revenues of nearly 11 percent. Tables 2 and 3 show that 33 percent of all internists providing voluntary assigned office visits experienced a decline in the range of 11 to 25 percent, and 47.5 percent of all internist-provided voluntary assigned office visits would fall into the range of an 11 to 25 percent decline in revenues. Among orthopedic surgeons providing voluntary assigned office visits, 39 percent of those services and 37 percent of those physicians would experience a revenue decline of between 11 and 25 percent as a result of implementing a statewide fee schedule.

Statewide Fee Schedules With a Hold-Harmless Provision

The fee schedule amounts calculated above were used in an additional simulation which incorporated a hold-harmless provision. While the schedule amounts remain the same as described in the previous section, the average allowed amounts incorporated the hold-harmless provision. The 1980 reimbursements under this system then become:

$$\mathrm{AAAHH}_{ij_{1980}} = \min \left[\mathrm{ABA}_{ij_{1980}}, \max \left(\mathrm{AAA}_{\mathrm{FS}_{i_{1980}}}, \mathrm{AAA}_{\mathrm{CPR}_{ij_{1980}}} \right) \right]$$

That is, the average allowed amount with hold-harmless ($AAAHH_{ij}$) is defined as the minimum of: (1) the average billed amount for procedure i and physician j (ABA_{ij}); and (2) the average allowed amount for procedure i under the fee schedule system (AAA_{FS_i}), and the average allowed amount for procedure i and physician j under the CPR system ($AAA_{CPR_{ij}}$), whichever is greater.

The 1980 average billed amounts were allowed to increase over time by the projected percentage increase in physicians' fees. Fee schedules (AAA_{FS_i}) increase over time by the projected percentage increase in the Medicare Economic Index. However, reasonables under the CPR system ($AAA_{CPR_{ij}}$) were held constant at their base year 1980 levels. Therefore, at some future point in time (i.e., post-1980), the fee schedule values will exceed the CPR allowed amounts for all physicians and all procedures, and the hold-harmless provision will become irrelevant. Thus in some year t following the implementation of the fee schedule, $AAAHH_{ij(t)}$ will be defined as:

$$AAAHH_{ij(t)} = \min\ ABA_{ij},\ \max\ (AAA_{FS_i},\ AAA_{CPR_{ij(1980)}})$$

where: $$AAA_{FS_{i_t}} = AAA_{FS_{i(1980)}} * (MEI_{(t)} / MEI_{(1980)}), \text{ and}$$

$$ABA_{ij(t)} = ABA_{ij(1980)} * (PPI_{(t)} / PPI_{(1980)})$$

with MEI = Medicare Economic Index, and PPI = Physicians Price Index. The factors for the MEI and the PPI are given in the tables below.

Table 5

Projected Increases in the Medicare Economic Index (MEI)

Year (t)	Ratio
1981	1.0815
1982	1.1676
1983	1.2714
1984	1.3536
1985	1.4325
1986	1.5140
1987	1.5982
1988	1.6843

Table 6

Projected Increases in the Physicians' Price Index $(PPI_{(t)}/PPI_{(1980)})$

Year (t)	Ratio
1981	1.1060
1982	1.2033
1983	1.2888
1984	1.3674
1985	1.4453
1986	1.5263
1987	1.6102
1988	1.6972

Simulation results showed that, aggregating across the five specialties and all procedures, 44 percent of all services were never paid at the hold-harmless level and 56 percent were paid at the hold-harmless level in the first year of implementation. In the second and third years following implementation of the fee schedule, the percentage of services paid at the hold-harmless level declined to 21 percent and 5 percent respectively. By the fourth year, the number had declined to less than 1 percent.

Table 7 presents the results for each of the five specialties. Internists and orthopedic surgeons are found to benefit most from a hold-harmless provision with over two-thirds of the services provided by those specialties being paid at hold-harmless levels at some point in time. General practitioners, on the other hand, fare much better under a statewide fee schedule; over two-thirds of the services provided by GPs are never paid at the hold-harmless level. The hold-harmless provision is irrelevant for each of the five specialties by the fourth year of the statewide fee schedule system, and for general practitioners this phenomenon occurs even earlier, by one year.

Table 7

Percent of Services Paid Each Year at Hold-Harmless Levels under a Statewide Fee Schedule Implemented in 1980 and Inflated by the Annual Percentage Increase in the Medicare Economic Index
Medicare Total, All Procedures

Specialty	Never	1980	1981	1982	1983
Total--Five Specialties	44%	56%	21%	5%	0%
General Practice	64	36	7	0	0
General Surgery	45	55	19	4	0
Internal Medicine	32	68	30	9	0
Ophthalmology	51	49	19	1	0
Orthopedic Surgery	33	67	27	9	0

Defining Areas and Specialties

As part of our study of procedure-based fee schedules, we investigated alternative definitions of areas and specialties. The newly defined areas and specialties were to be used to calculate procedure-based, sub-state,

specialty-specific fee schedules. The methodology used to construct the area and specialty groupings is presented in the following sections.

Defining Sub-State Areas

The definition of sub-state areas was undertaken using our data from the state of California. If our methods for developing fee schedule regions are to be applicable to states other than California, the methods must be as conceptually straightforward as possible. For this reason, we restricted the set of feasible partitions of the state to those constructed by grouping existing geopolitical regions--counties (and PSROs).

Restricting the analysis to a study of agglomerations of existing counties (and PSROs) still leaves a large set of feasible combinations of counties from which we can select fee schedule areas. We constructed sub-state regions by grouping together counties in which average fee levels were roughly the same over a given span of time. In this way, we attempted to partition California into sub-state regions where the variation in average fee levels within the regions was less than the variation between the regions.

This approach required estimates of the average fees charged by physicians in each of California's counties. We developed them from estimates of 1980 average reasonable charges by each physician in the state for the same 470 procedures used to calculate the statewide fee schedules. According to our definition, the average reasonable charge for a procedure is the minimum of the physician's customary fee and 1980 prevailing charge.

To permit development of an average charge across an array of procedures, we divided physicians' average reasonables by the CRVS unit value per procedure. Using service volume as weights, we defined county-wide average fees to be weighted means of physicians' reasonable charges per RVS unit. The average

fees included all physicians in the county (PSRO) performing procedures in one or more of the following categories: medicine, medicine visits, medicine non-visits, surgery, radiology, and pathology. In addition, a county-wide estimate of average reasonable fees per RVS unit across all procedures was calculated. As previously noted, RVS units are comparable within but not across procedure types, therefore, we once again utilized a "converted" RVS value.*

Table 8 presents county-specific average charges per CRVS unit for each category of list procedures and for all procedures combined. It should be noted that Los Angeles county was decomposed into its constituent PSROs. This disaggregation was undertaken for two reasons.

First, we wished to analyze fee patterns in small areas which we would later aggregate into larger regions. Since most PSROs are comprised of counties, we selected the smaller geographic unit as the basis of analysis. In the case of Los Angeles, however, the situation was reversed since LA county includes eight PSROs. We therefore used the constituent PSROs as the basic geographic regions of LA county.

The second reason for disaggregating LA county into PSROs is that Los Angeles accounts for a large fraction of the total volume of insured services provided to beneficiaries in the state--nearly 38 percent of the CRVS units.

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*The conversion factors represent our estimate of the "value" of CRVS units in terms of a numeraire. We assumed that the ratio of statewide average customary charges for procedures in two categories was a rough approximation of their relative worth. We then constructed conversion factors from ratios of statewide average customary charges per RVS unit for procedures in each category relative to statewide average customaries for medicine procedures. Multiplying listed CRVS values for surgery, radiology, and pathology procedures by these conversion factors resulted in a set of normalized CRVS values. Using these normalized values, we computed county- and PSRO-specific charges per RVS unit across all list procedures.

Table 8

THE COUNTIES OF CALIFORNIA RANKED BY THE

AVERAGE REASONABLE CHARGE PER NORMALIZED CRVS UNIT

COUNTY NAME	ALLCRVS REGION	CRVS MEDICINE VISITS	CRVS MEDICINE NON VISITS	CRVS MEDICINE	CRVS SURGURY	CRVS RADIOLOGY	CRVS PATHOLOGY
MARIPOSA	.84	.82	1.04	.84	49.19	3.80	.34
GLENN	.85	.87	1.00	.87	49.74	1.90	.32
AMADOR	.86	.89	.92	.89	44.48	4.24	.31
CALAVERAS	.68	.87	1.02	.88	49.34	3.92	.42
SIERRA	.91	.90	1.18	.90	47.93	.00	.44
MENDOCINO	.93	.92	.97	.92	48.46	3.50	.43
NEVADA	.93	.94	.92	.93	50.09	4.77	.40
PLUMAS	.93	.93	.97	.93	45.28	4.02	.41
KINGS	.94	.95	.94	.94	44.95	4.27	.42
SUTTER	.94	.95	.99	.95	47.75	3.94	.42
MONTEREY	.95	.98	.96	.98	50.04	4.27	.38
SAN BENITO	.95	.97	.92	.97	50.30	4.44	.38
TEHEMA	.95	.95	.91	.95	51.93	4.25	.43
TRINITY	.95	.96	.85	.96	44.86	3.92	.42
ALAMEDA	.96	.96	.96	.96	51.22	4.33	.42
CONTRA COSTA	.96	.96	.98	.96	51.48	3.75	.44
EL DORADO	.96	.99	.90	.98	50.75	3.38	.41
MODOC	.96	.93	.97	.94	48.85	4.82	.45
PLACER	.96	.96	.95	.96	49.30	4.62	.41
SANTA CRUZ	.96	.98	.92	.97	51.74	4.35	.39
TUOLUMNE	.96	.96	.94	.96	49.17	4.87	.40
FRESNO	.97	.97	1.03	.98	50.64	4.21	.42
IMPERIAL	.97	1.01	.97	1.00	55.51	4.84	.39
SACRAMENTO	.97	.97	.98	.97	51.12	4.75	.42
AN FRANCISCO	.97	.99	.97	.99	54.11	4.89	.37
SHASTA	.97	.96	.98	.96	48.52	4.48	.44
SONOMA	.97	1.00	.95	.99	46.75	4.81	.38
STANISLAUS	.97	.98	1.05	.99	50.13	4.52	.40
TULARE	.97	.99	.99	.99	49.76	4.48	.40
YUBA	.97	.97	.89	.95	51.48	4.30	.46
COLUSA	.98	.98	.99	.98	46.84	4.36	.41
LASSEN	.98	.97	.92	.97	48.06	5.01	.44
MERCED	.98	1.01	.99	1.00	50.61	3.21	.42
LAKE	.99	.98	1.04	.99	50.16	4.77	.43
LA PSRO 23	.99	1.01	1.06	1.02	56.08	4.92	.40
MADERA	.99	1.01	1.05	1.01	52.22	3.84	.42
RIVERSIDE	.99	1.00	.98	1.00	53.59	4.41	.42
BERNARDINO	.99	.99	1.01	.99	51.33	4.40	.43
SANTA CLARA	.99	1.00	.97	.99	52.84	4.83	.42
SISKIYOU	.99	.99	.94	.99	52.23	4.55	.44
HUMBOLDT	1.00	1.02	1.08	1.03	49.87	3.76	.41
LA PSRO 21	1.00	1.01	.99	1.01	54.46	4.70	.41
LA PSRO 24	1.00	1.01	1.02	1.01	54.37	4.84	.41
BUTTE	1.01	1.01	.93	1.01	48.42	4.24	.46
INYO	1.01	1.02	.91	1.01	54.77	5.12	.43
ORANGE	1.01	1.03	1.06	1.03	55.51	4.68	.41
SAN DIEGO	1.01	1.03	1.04	1.03	52.35	4.76	.42
SAN JOAQUIN	1.01	1.00	.99	1.00	50.24	4.83	.46
YOLO	1.01	1.03	.96	1.02	51.72	4.58	.43
LOS ANGELES	1.02	1.05	1.03	1.04	55.30	4.83	.42
LA PSRO 20	1.02	1.04	1.03	1.04	56.86	4.95	.42
MARIN	1.02	1.06	.94	1.04	50.35	4.73	.42
MONO	1.02	1.03	1.00	1.03	52.62	4.76	.41
DEL NORTE	1.03	1.05	.87	1.03	51.02	4.82	.45
LA PSRO 15	1.03	1.05	1.03	1.05	53.58	4.82	.41
NAPA	1.03	1.04	.96	1.03	49.60	4.88	.46
SAN MATEO	1.03	1.05	.98	1.04	52.45	4.89	.44
VENTURA	1.03	1.04	1.07	1.04	53.74	5.24	.43
LA PSRO 19	1.04	1.07	1.01	1.07	54.79	4.53	.42
LUIS OBISPO	1.05	1.07	1.01	1.07	53.30	4.90	.43
ANTA BARBARA	1.05	1.06	.98	1.05	53.78	4.92	.45
SOLANO	1.07	1.09	1.04	1.08	52.43	4.44	.48
KERN	1.09	1.05	1.06	1.05	51.90	5.20	.52
LA PSRO 22	1.09	1.13	1.05	1.12	56.11	4.75	.45
LA PSRO 25	1.09	1.11	1.05	1.10	55.33	4.98	.47

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Therefore, it is important to examine fee patterns in LA county in as much detail as possible. The constituent PSROs provided a ready-made partitioning of the county, facilitating detailed analysis of intra-county variations in physicians' fees. The eight Los Angeles PSROs and the 56 other counties for which we had physicians' fee data gave a total of 64 small areas. These small areas were then grouped into larger fee schedule areas through a series of cluster analysis techniques described below.

Statistical cluster analysis is not actually a single method, but a set of approaches or algorithms for imposing a structure upon some set of objects. At the heart of all clustering algorithms is the notion of "distance" between the objects of interest. The objective of an algorithm is to group these objects in such a way that those which are "close to" each other (along the selected distance metric) will be placed in a common cluster. Because we believed that simplicity and ease of implementation were important characteristics of clustering methods, we concentrated our efforts on grouping the counties along the all-inclusive cost dimension (ALLCRVS in Table 8). For each county and PSRO, we computed the average charge per CRVS unit for list procedures charged by local physicians. The goal then becomes the construction of groups of counties and PSROs such that counties within groups have "similar" values of ALLCRVS while assuring that average values of ALLCRVS are different between groups.

Four clustering methods were employed in this analysis. We shall refer to them as the standard deviation method, quartile, thirds, and Ward's clustering method, respectively. The results of each will be discussed in turn.

In the standard deviation approach, we computed the statewide weighted mean and standard deviation of average charges per CRVS unit (ALLCRVS) across

the counties and Los Angeles PSROs; as weights we used the total volume of services provided by the physicians in each region. We then developed six ranges of ALLCRVS based upon the weighted mean (x) and the standard deviation (s):

(1) 0 ALLCRVS $x - 2s$
(2) $x - 2s$ ALLCRVS $x - s$
(3) $x - s$ ALLCRVS x
(4) x ALLCRVS $x + s$
(5) $x + s$ ALLCRVS $x + 2s$
(6) $x + 2s$ ALLCRVS max

Each county was assigned to one of the six groups based upon its ALLCRVS value. If a separate fee schedule were developed for each of the six groups, the average charge per RVS unit in each would be the weighted average of the ALLCRVS values associated with the counties in the group. Group-specific mean values of ALLCRVS are reported in Table 9 under the heading "Standard Deviation Method."

The second method employed was the quartile method. This approach involved identification of the 25th, 50th, and 75th percentile points of the weighted distribution of county-specific ALLCRVS values. Four clusters of counties resulted: those in the lowest quartile of the weighted distribution, those in the second quartile (i.e., the 25th to 50th percentile points of the distribution), in the third (50th to 75th percentile), and the fourth (those counties with ALLCRVS values in excess of the 75th percentile value). Once again, weighted means of ALLCRVS across all counties in each of the four groups were calculated (and reported in Table 9).

The third clustering technique parallels the quartile method, except that it divided the distribution into thirds. That is, the 33rd and 67th percentile

Table 9

Mean Charges Per CRVS-Unit for List Procedures in Counties Under Alternatively Specified Fee Schedules

OUNTY NAME	ALLCRVS	CRVS STATE	STANDARD DEVIATION METHOD		QUARTILE METHOD		THIRDS METHOD		FOUR GROUP CLUSTER	
ARIPOSA	0.840	1.006	0.915		0.964		0.974		0.964	
LENN	0.850	1.006	0.915		0.964		0.974		0.964	
MADOR	0.860	1.006	0.915		0.964		0.974		0.964	
ALAVERAS	0.880	1.006	0.915	i	0.964		0.974		0.964	
IERRA	0.910	1.006	0.915		0.964		0.974		0.964	
LUMAS	0.930	1.006	0.915		0.964		0.974		0.964	
EVADA	0.930	1.006	0.915		0.964		0.974		0.964	
ENDOCINO	0.930	1.006	0.915		0.964		0.974		0.964	
UTTER	0.940	1.006	0.965		0.964		0.974		0.964	
INGS	0.940	1.006	0.965		0.964		0.974		0.964	
RINITY	0.950	1.006	0.965		0.964		0.974		0.964	1st
N BENITO	0.950	1.006	0.965		0.964		0.974		0.964	
EHEMA	0.950	1.006	0.965		0.964		0.974		0.964	cluster
NTEREY	0.950	1.006	0.965		0.964	1st	0.974		0.964	
DOC	0.960	1.006	0.965		0.964		0.974	u	0.964	
OLUMNE	0.960	1.006	0.965	ii	0.964		0.974	pp	0.964	
L DORADO	0.960	1.006	0.965		0.964	q	0.974	e	0.964	
ACER	0.960	1.006	0.965		0.964	u	0.974	r	0.964	
NTA CRUZ	0.960	1.006	0.965		0.964	a	0.974		0.964	
NTRA COSTA	0.960	1.006	0.965		0.964	r	0.974	t	0.964	
AMEDA	0.960	1.006	0.965		0.964		0.974	h	0.964	
BA	0.970	1.006	0.965		0.964	t	0.974	i	0.964	
PERIAL	0.970	1.006	0.965		0.964	i	0.974		0.964	
ASTA	0.970	1.006	0.965		0.964	l	0.974	r	0.964	
LARE	0.970	1.006	0.965		0.964		0.974	d	0.964	
NOMA	0.970	1.006	0.965		0.964	e	0.974		0.964	
ANISLAUS	0.970	1.006	0.965		0.964		0.974		0.964	
ESNO	0.970	1.006	0.965		0.964		0.974		0.964	
CRAMENTO	0.970	1.006	0.965		0.964		0.974		0.964	
FRANCISCO	0.970	1.006	0.965		0.964		0.974		0.964	
SSEN	0.980	1.006	0.994		0.964		0.974		0.964	
LUSA	0.980	1.006	0.994		0.964		0.974		0.964	
RCED	0.980	1.006	0.994		0.964		0.974		0.964	
KE	0.990	1.006	0.994		0.994		0.974		1.000	
SKIYOU	0.990	1.006	0.994	iii	0.994		0.974		1.000	
DERA	0.990	1.006	0.994		0.994		0.974		1.000	
RNARDINO	0.990	1.006	0.994		0.994		0.974		1.000	
IVERSIDE	0.990	1.006	0.994		0.994	2nd	0.974		1.000	
NTA CLARA	0.990	1.006	0.994		0.994		0.974		1.000	2nd
A PSRo * 23	0.990	1.006	0.994		0.994		0.974		1.000	cluster
MBOLDT	1.000	1.006	0.994		0.994	q	1.005		1.000	
A PSRO * 21	1.000	1.006	0.994		0.994	u	1.005		1.000	
A PSRo # 24	1.000	1.006	0.994		0.994		1.005		1.000	
NYO	1.010	1.006	1.019		1.012		1.005	m	1.000	
LO	1.010	1.006	1.019		1.012		1.005	i	1.000	
TTE	1.010	1.006	1.019		1.012		1.005		1.000	
N JOAQUIN	1.010	1.006	1.019		1.012	3rd	1.005	d	1.000	
ANGE	1.010	1.006	1.019		1.012		1.005		1.000	
N DIEGO	1.010	1.006	1.019	iv	1.012	q	1.005		1.000	
NO	1.020	1.006	1.019		1.012	u	1.049		1.030	
RIN	1.020	1.006	1.019		1.012		1.049		1.030	
PSRO * 20	1.020	1.006	1.019		1.012		1.049		1.030	
L NORTE	1.030	1.006	1.019		1.057		1.049		1.030	3rd
PA	1.030	1.006	1.019		1.057		1.049	l	1.030	cluster
NTURA	1.030	1.006	1.019		1.057		1.049	o	1.030	
N MATEO	1.030	1.006	1.019		1.057	4th	1.049	w	1.030	
PSRO # 18	1.030	1.006	1.019		1.057		1.049		1.030	
A PSRO # 19	1.040	1.006	1.019		1.057		1.049	e	1.030	
IS OBISPO	1.050	1.006	1.054		1.057	q	1.049	r	1.030	
TA BARBARA	1.050	1.006	1.054	v	1.057	u	1.049		1.030	
LANO	1.070	1.006	1.054		1.057	a	1.049	t	1.087	
RN	1.080	1.006	1.088		1.057		1.049	h	1.087	
A PSRo * 22	1.090	1.006	1.088		1.057	r	1.049	i	1.087	4th
A PSRO # 25	1.090	1.006	1.088	vi	1.057	t	1.049	r	1.087	cluster
						i		d		
						l				

points of the distribution were identified and counties were assigned to one of three groups based upon their ALLCRVS value.

The fourth technique used an explicit statistical clustering program known as Ward's method. In this approach, each of the counties is initially considered to be a cluster or group of only one member. The clustering algorithm proceeds in a sequential manner by first locating the two "closest" clusters and merging them forming a new cluster. The algorithm then joins the two closest of the new set of clusters. This process is repeated until a single, all-inclusive cluster is generated at the final step. We assumed that four groups of counties was reasonable for the purpose of implementing sub-state fee schedules. In Table 9 we present the average value of ALLCRVS computed for the member counties in each of the four clusters.

Table 9 also includes the value of ALLCRVS for each county and PSRO as well as the weighted mean of ALLCRVS computed across all counties in the state. We present these two values as benchmarks against which one may compare the charge per RVS unit expected under the alternative county groupings.

Reading across the rows of Table 9, average charges per RVS unit under each of the four computational methods can be observed. For example, in Mariposa county, average fees per RVS unit would be set at $0.915, $0.964, $0.974, and $0.964 under fee schedules developed via the standard deviation, quartile, thirds, and clustering methods, respectively. These contrast with the average charge per unit of $1.006 in the case of a statewide fee schedule.

Choosing the most appropriate method is difficult for two reasons. First, several methods yielded very similar results—for example, the quartile and four-group cluster methods. Second, within each method, the boundaries

between clusters are not particularly distinct. For instance, the values for Mendocino and Sutter counties which are in clusters 1 and 2, respectively, under the standard deviation method, are approximately equal. However, they were assigned to separate groupings in the cluster analysis. As a result of the similarities between some clusters and the general lack of sharp distinctions between county groups, no clearly superior technique is readily apparent.

Defining Specialty Groupings

Specialty-specific fee schedules take one of three forms: separate schedules for each specialty; a single schedule applicable to all specialties; and distinct fee schedules for groups of specialties. The latter schedule is the one of interest here. The analysis described here involved examination of alternative approaches to creating specialty groupings. Two basic grouping criteria were used. The first created groups according to relative ranges of average reasonable charges for medical visits. Several variants of that approach were examined. The second approach ignored charge data and grouped specialties according to standard AMA specialty classifications (e.g., surgical, medical, etc.). The overall cost impact of implementing a specialty-based fee schedule will be small, however, there will be distributional effects across the various specialties.

Identifying Dominated Procedures. Our first task in establishing specialty groupings for a specialty-based fee schedule is to classify procedures according to whether or not they are dominated by an individual specialty. For example, we can anticipate that the majority of ophthamology related procedures are performed by ophthamologists. For such procedures, implementation of a specialty-based system will generally have little, or a potentially

undesirable impact. The dominant specialty will set the schedule's fee under an averaging scheme, and non-dominant specialties may receive fees at wide variance from those paid the dominant specialty.

To identify such dominated procedures, we examined the frequency with which physicians in 26 specialties performed each of 422 "list" procedures representing the bulk of Medicare services.*

Rather than determining which of the 422 procedures was dominated by a single specialty, we made that determination for groupings of them. These procedures ae readily categorized into one of five, mutually exclusive, classes: medical visits, medical non-visits, surgery, radiology, and pathology. Furthermore, the first two can be collapsed into a larger, sixth, category: medicine.

We identified dominated procedure categories by computing the proportion of the procedures in that class that we judged to be dominated by a specialty.

We employed the following algorithm to make that determination. If at least one of the physician specialties was adjudged to be dominant in the provision of the i^{th} procedure in the c^{th} category, an indicator variable, d_{ic}, was set to one. The proportion of the list procedures in a category associated with a dominant specialty was defined by:

$$D\%_c = \frac{\sum_{i \in c} d_{ic}}{n_c}$$

---

*We have claims data for 38 "profile" specialties. However, we were primarily interested in the 26 medical specialties within that group. Consequently, we eliminated data for the following specialties: clinic, dentistry, podiatry, medical supply co., ambulance, psychology, portable x-ray supplier, audiology, physical therapy, independent lab, chiropractic, and miscellaneous.

There are over 470 "list" procedures on our data file. However, only 422 were performed by the 26 specialties of primary interest to us.

where

$D\%_c$ is the proportion of the procedures in the c^{th} category associated with a dominant specialty, and

n_c is the number of total procedures in the c^{th} category.

In this study, a dominant specialty provides at least some "threshold" proportion of the state-wide volume of services for a given procedure. As there is no theoretically correct or most appropriate value for this threshold level, we computed $D\%_c$ for a range of feasible threshold values. In alternative specifications, we defined the dominant specialties to be those whose members provided at least 75 percent, 50 percent, 35 percent, or 25 percent of the state-wide volume of services for list procedures. For example, when we required the dominant specialty to deliver 35 percent or more of a procedure, state-wide, the variable d_{ic} took the value one if at least one profile specialty provided that proportion of services for the i^{th} procedure.

In Table 10, we report the values of $D\%_c$ for each of the six general procedure categories at each of the four dominance threshold levels. An inspection of these data reveals that pathology and medical visits are the least dominated categories of procedures. At threshold levels of 50 and 75 percent--for which only one specialty can dominate the market for any procedure--relatively small fractions of pathology and visit procedures are associated with a dominant specialty. For instance, when we defined the dominant specialty as performing at least 50 percent of the services for a procedure, about 7.5 percent of pathology procedures are associated with such a specialty. The next lowest proportion is the 18.9 percent of all medical visits for which there exists a dominant specialty. At lower threshold levels--where more than one specialty could be considered dominant with

Table 10

Percent of Procedures in a Category for Which a Single Specialty Provided at Least the Specified Proportion of a Procedure

(four alternative dominance thresholds)

Procedure Category	Number of Procedures	75+ %	50+ %	35+ %	25+ %
Medicine Total	114	22.807	39.474	70.175	81.579
Medical Visits	53	5.660	18.868	71.698	86.792
Medical Non-Visits	61	37.705	57.377	68.852	77.940
Surgery	137	49.635	72.263	86.131	90.511
Radiology	85	12.941	44.706	84.706	94.118
Pathology	106	0.943	7.547	22.642	43.396

respect to each procedure--pathology remained the least dominated category, with the two "medical" categories following. Throughout, surgery was the most (or second most) dominated procedure class.

Because the proportion of procedures which are dominated could be misleading due to different procedures being supplied with greatly different frequencies, we weighted each procedure by the state-wide number of services provided by the dominant specialty.

If a profile specialty dominated the i^{th} procedure, the computational algorithm flagged that procedure by setting an associated indicator variable (d^s_{ic}) to one. The indicator was weighted by the total number of services used for Medicare profiling (f^s_{ic}) produced by physicians in the s^{th} specialty in California in 1980. The proportion of state-wide services in the c^{th} category associated with a dominant specialty is defined as $F\%_c$ and is computed:

$$F\%_c = \frac{\sum_{i \in c} \sum_s f^s_{ic} \, d^s_{ic}}{\sum_{i \in c} \sum_s f^s_{ic}}$$

In table 11, we report the value of $F\%_c$ for each of the six general procedure categories and all four levels of the dominant-specialty threshold. An inspection of these data reveals that medical visits and pathology procedures are the least dominated categories in terms of the proportions of services performed by single specialties. When we defined a dominant specialty as one delivering at least 50 percent of all services for a procedure, less than 0.27 percent of all medical visits were delivered by such physicians. In contrast, over half (58.04 percent) of surgical services were delivered by physicians in dominant specialties. When we set the dominance threshold at 50 percent and 75 percent, visits was the least dominated of the six procedure categories. When the dominance threshold was set at the 35 percent or the 25 percent level, pathology was the least dominated procedure class with visits next lowest.

Table 11

Percent of Statewide Occasions of Service for Procedures in Each Category Delivered by Physicians in a Dominant Specialty

(four alternative dominance thresholds)

Procedure Category	State Total	75+ %	50+ %	35+ %	25+ %
Medicine Total	21,955,210	3.313	4.281	24.438	34.363
Medical Visits	19,549,458	0.009	0.269	20.906	31.734
Medical Non-Visits	2,405,752	30.163	36.883	53.141	55.729
Surgery	701,617	33.379	58.035	65.262	70.666
Radiology	1,485,368	6.570	15.529	48.650	57.212
Pathology	4,303,359	0.088	6.457	12.208	21.935

Together, the data of Tables 10 and 11 reveal that pathology and medical visit procedures are the most widely performed across the 26 specialties of interest in this analysis. Furthermore, inspection of Table ___ also reveals that, in terms of the total volume of services performed, medical visits are by far the most important category. Of the 28.4 million occasions of service summarized in that table, 19.5 million (68.7 percent) are for visits. In addition, medical visits accounted for 59 percent of total charges, statewide.

Recognizing specialty differences in setting fee schedules would seem to have the greatest impact on medical visits and pathology fees. These are the procedures least dominated by a single specialty. Medical visits also account for the largest fraction of services. However, allowing specialty differences for pathology charges runs counter to the intent of the prudent buyer regulations. These regulations assume pathology services are homogeneous and attempt to reduce variation in payment levels rather than preserve it. We have, therefore, limited the exploration of specialty groupings to the medical visits category.

Constructing Specialty Groups from Medical Visit Charges

Our method for constructing groups of medical specialties was to cluster specialties with similar patterns of average charges for medical visits. This approach required data on the average reasonable fees of physicians in each medical specialty. We computed such average reasonable charges using an algorithm analogous to the one employed in constructing sub-state groupings for fee schedules.

We based specialty-specific average fees upon average reasonable charges of California physicians in 1980. Analogous to our area analysis, we defined

average reasonable fees per procedure to be the lesser of a physician's customary fee or the locally prevailing charge. To permit computation of a meaningful average fee across an array of visit procedures, we first computed ratios of procedures' reasonable fees to their associated California Relative Value Studies (CRVS) score. Then, using the occasions of service for each procedure delivered by a physician as frequency weights, we computed specialty-wide average charges per visit unit ($\$CRVS^s_f$) as the weighted means of individual specialists' reasonable fees per CRVS unit.

This algorithm is applicable to any procedure class--not just visits. In general, let AR^s_{ij} be the average reasonable fee charged by the i^{th} physician--a member of the s^{th} specialty--for the j^{th} medical procedure. The estimated average reasonable charge for all procedures in the c^{th} procedure class associated with physicians in the s^{th} specialty is

$$\$CRVS^s_c = \frac{\sum\limits_{j \in c} \sum\limits_{i \in s} \left(\frac{AR^s_{ij}}{CRVS_j} \quad N^s_{ij} \right)}{\sum\limits_{j \in c} \sum\limits_{i \in s} \quad N^s_{ij}}$$

Here, N^s_{ij} is the volume of services for procedure j performed by physician i. When computing a value for $CRVS across all procedure classes, combined, the CRVS values for each procedure must be "normalized" as the California Relative Value Study contains different scales of value for each major procedure category.

We employed five simple grouping methods in this analysis; four were identical to the techniques in our previous grouping of counties and the fifth corresponds to the specialty groupings used by the American Medical Association. In the first or standard deviation method, we computed the weighted

mean and standard deviation of charges per CRVS unit for visits across the 26 medical specialties. As weights we used the volume of services (in CRVS units) provided by physicians in each of the specialties. Next, we developed six ranges of charges per unit ($\$CRVS_v^s$) based upon the weighted mean (x) and standard deviation (d):

(i) $0 < \$CRVS_v^s \leq x-2d$

(ii) $x-2d < \$CRVS_v^s \leq x-d$

(iii) $x-d < \$CRVS_v^s \leq x$

(iv) $x < \$CRVS_v^s \leq x+d$

(v) $x+d < \$CRVS_v^s \leq x+2d$

(vi) $x+2d < \$CRVS_v^s \leq \max.$

We assigned each specialty to one of the six groups according to its $\$CRVS_v^s$ value. For example, we assigned to the ivth group all specialties whose average charge per unit was in the range x to x+d, that is, between the mean of $\$CRVS_v^s$ and one standard deviation above the mean. If each group had its own fee schedule, the average charge per CRVS-unit in a group would be the weighted average of $\$CRVS_v^s$ across all the specialties in it. We computed group-specific means of $\$CRVS_v^s$ and report them in Table 3.

In the second clustering algorithm we identified the 25th, 50th, and the 75th percentile points on the distribution of weighted $\$CRVS_v^s$ values. This quartile approach yielded four clusters of specialties; those whose values of $\$CRVS_v^s$ were in the lowest quartile of its distribution, those in the second, third, and fourth (highest) quartiles. We computed weighted means of $\$CRVS_v^s$

across all the specialties in each of the four groups and report them in the column labeled Quartile Method in Table ___.

Our third clustering technique was an analog of the second, except that in the former, we divided the distribution of $\$CRVS_v^s$ into thirds rather than quartiles. That is, we identified the 33rd and 67th percentile points on the weighted distributions; then we assigned specialties to one of the three groups depending upon whether their average charge per visit-unit was in the lower, mid, or upper third of the distribution. We computed the weighted means of $\$CRVS_v^s$ across the specialties in each of the three groups, and we report them in Table ___ as the thirds method.

Our fourth approach to clustering specialties employed the clustering algorithm, Ward's method, described earlier. The most reasonable number of final clusters (in terms of the groups' members and the absence of any single-specialty groups) was the three group cluster. In Table ___, we present the average value of $\$CRVS_v^s$ for the specialties in each of the three groups.

Finally, we adopted the conventional American Medical Association (AMA) specialty grouping scheme as a reasonable candidate. Under this method, each specialty is assigned membership in one of four major categories: general practice, medical specialties, surgical specialties, and other specialties.*

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*Based upon the AMA's publication Physician Distribution and Medical Licensure in the United States, 1979, we grouped our 26 specialties as follows:

General Practice	Medical Spec.	Surgical Spec.	Other Spec.
general practice	pediatrics	otology	neurology
family practice	dermatology	obstetrics	pathology
	allergy	general surgery	anesthesiology
	gastroenterology	ophthalmology	radiology
	internal medicine	plastic surgery	psychiatry
	cardiovascular dis.	neuro surgery	physical medicine
	pulmonary disease	thoracic surgery	
	nephrology	urology	
		colon surgery	
		orthopedic surgery	

The entries in each row of Table 12 are estimates of the average payment per visit-unit to specialists under each grouping arrangement. For example, if physicians' reimbursements are derived from charge data for each specialty on a specialty-by-specialty basis, general practitioners' payments would be $0.990 per CRVS-unit. Under a fee schedule derived from charges of all specialties combined, i.e., under a specialty-free schedule, general practitioners' payments per unit would be somewhat greater, $1.011. Medicare reimbursements to G.P.s would be $0.086, $0.952, $0.952, $0.987, and $0.982 under specialty-group-specific fee schedules corresponding to groups defined via the standard deviation approach, the quartile and thirds methods, Ward's clustering algorithm, and the AMA groups.

Choosing one method from among these is difficult primarily because fee levels under schedules corresponding to the alternative grouping arrangements are not appreciably different from fees computed on an individual specialty-specific basis. Such differences are generally on the order of 5 percent or less, and rarely exceed 10 percent. Two grouping methods are associated with fee schedules which are the most different from specialty-specific average charges: the AMA groups and the pooling of all specialties to yield a single, state-wide, specialty-free schedule.

Excluding pediatricians, as they provide few Medicare services, the greatest change in fees realized by replacing specialty-specific average charges with a fee schedule based on the AMA groups is increases in per-unit reimbursements to dermatologists, allergists, and otologists. Members of these specialties would have fees per visit-unit increased by 10.2 percent, 7.9 percent, and 6.3 percent, respectively. At the other extreme, replacing specialty-specific fees with a schedule corresponding to AMA groups would

Table 12

Mean Charges Per CRVS-Unit for Medical Visits Under Seven Grouping Arrangements (26 Medical Specialties)

Specialty Name	$\$CRVS_v^s$	$CRVS (State)	Standard Deviation Method	Quartile Method	Thirds Method	Three-Group Cluster	AMA Specialties*
Pediatrics	0.860	1.011	0.860	0.952	0.952	0.894	1.025 M
Dermatology	0.930	1.011	0.934	0.952	0.952	0.894	1.025 M
Allergy	0.950	1.011	0.934	0.952	0.952	0.894	1.025 M
Otology	0.960	1.011	0.986	0.952	0.952	0.894	1.020 S
General Practice	0.980	1.011	0.986	0.952	0.952	0.987	0.982 G
Family Practice	0.990	1.011	0.986	0.998	1.037	0.987	0.982 G
Obstetrics	0.990	1.011	0.986	0.998	1.037	0.987	1.020 S
Gastroenterology	1.010	1.011	0.986	0.998	1.037	0.987	1.025 M
Plastic Surgery	1.010	1.011	0.986	0.998	1.037	0.987	1.020 S
Ophthalmology	1.010	1.011	0.986	0.998	1.037	0.987	1.020 S
General Surgery	1.010	1.011	0.986	0.998	1.037	0.987	1.020 S
Neuro Surgery	1.030	1.011	1.058	1.058	1.037	1.065	1.020 S
Pathology	1.040	1.011	1.058	1.058	1.037	1.065	1.063 -
Neurology	1.040	1.011	1.058	1.058	1.037	1.065	1.063 -
Thoracic Surgery	1.050	1.011	1.058	1.058	1.037	1.065	1.020 S
Urology	1.050	1.011	1.058	1.058	1.037	1.065	1.020 S
Internal Medicine	1.060	1.011	1.058	1.058	1.037	1.065	1.025 M
Anesthesiology	1.060	1.011	1.058	1.058	1.037	1.065	1.063 -
Radiology	1.070	1.011	1.058	1.088	1.088	1.065	1.063 -
Pulmonary Disease	1.080	1.011	1.084	1.088	1.088	1.065	1.025 M
Cardiovascular	1.080	1.011	1.084	1.088	1.088	1.065	1.025 M
Colon Surgery	1.080	1.011	1.084	1.088	1.088	1.065	1.020 S
Orthopedic Surgery	1.090	1.011	1.084	1.088	1.088	1.065	1.020 S
Psychiatry	1.090	1.011	1.084	1.088	1.088	1.065	1.063 -
Physical Medicine	1.120	1.011	1.084	1.088	1.088	1.065	1.063 -
Nephrology	1.150	1.011	1.150	1.088	1.088	1.065	1.025 M

*Key—AMA Groupings

G general practice
M medical specialties
S surgical specialties
- other specialties

reduce per-unit fees of physicians in the following specialties by at least 5 percent: pulmonary disease, cardiovascular disease, colon surgery, orthopedic surgery, physical medicine, and nephrology. Among these, the specialty experiencing the greatest implicit reduction in fees is nephrology (-10.9 percent) followed by orthopedic surgery (-6.4 percent).

Replacing a payment system based upon individual-specialists' average fees with a fee schedule having no specialty distinctions would not appreciably alter physician's reimbursements. Excluding pediatrics, the specialties whose fees would experience the greatest increases under such a change are, again, dermatologists, allergists, and otologists; their payments per unit would increase by 8.7 percent, 6.4 percent, and 5.3 percent, respectively. For no other specialties would such a change in reimbursement methods result in fee increases of 5 percent or greater. At the other extreme, physicians in eight specialties would have their reimbursements per visit-unit reduced by at least 5 percent if a specialty-specific payment system was replaced by a specialty-free fee schedule. The greatest revenue losses would be experienced by physicians in physical medicine (-9.7 percent) and nephrology (-12.1 percent). Revenue reductions per visit-unit of between 5.5 percent and 7.2 percent would be experienced by physicians in the following specialties: radiology, pulmonary disease, cardiovascular disease, colon surgery, orthopedic surgery, and psychiatry.

Two points must be made concerning these results. First, even the most extreme differences between specialty-specific and group-specific fee schedule payments are small by absolute standards, rarely reaching or exceeding the 10 percent level. Second, although fees for about half the 26 specialties would change by 5 percent or more if specialty-specific payments were replaced with

group-specific fee schedules, these specialties do not account for anything approaching half the volume of insured services in California. The three specialties whose members would gain revenue per unit in the scenario we discussed (dermatology, allergy, and otology) accounted for only 4.95 percent of all medical visits in the state. Similarly, the eight specialties which are potential revenue losers accounted for only 11.14 percent of such services. Furthermore, the specialties whose revenues per unit might suffer the most severe decline (physical medicine and nephrology) accounted for a scant 1.43 percent of the medical visit-units produced in the state.

These alternative methods of defining specialty groupings were then used to calculate specialty-specific fee schedules. This analysis was confined to our standard set of six specialties including general practice and family practice (two specialties which will be combined in the later simulations), general surgery, internal medicine, ophthalmology, and orthopedic surgery. When the different grouping methods are associated with similar fee schedules for these specialties, our simulations will be insensitive to the method of grouping selected. This will hold even if the different specialty grouping methods produce very different fee schedules for the 20 other specialties.

For these six specialties, we computed the percent difference between specialty-specific average charges ($\$CRVS_v^s$) per unit and reimbursement under the fee schedules corresponding to each alternative specialty grouping method; we report these data in Table 13. In the immediately preceding discussions, we limited ourselves to comparisons of $\$CRVS_f^s$ values and fee schedules associated with AMA groups and all specialties combined; these are the last two columns of Table 13.

Table 13

Percent Difference Between Specialty's Mean Charge and Group Mean Charges Under Alternative Grouping Methods

Specialty	St.Dev. Method	Quartile Method	Thirds Method	Ward's Cluster Method	AMA Groups Method	$CRVS State-wide
General Practice	0.61%	-2.86%	-2.86%	0.71%	0.20%	3.10%
Family Practice	-0.40	0.81	4.75	-0.30	-0.81	2.12
General Surgery	-2.38	-1.19	2.67	-2.28	0.99	0.10
Internal Medicine	-0.19	-0.19	-2.17	0.47	-3.30	-4.62
Ophthalmalology	-2.38	-1.19	2.67	-2.28	0.99	0.10
Orthopedic Surgery	-0.55	-0.18	-0.18	-2.29	-6.42	-7.24

For the six simulation specialties, the greatest percentage differences are between specialty-specific fees and the state-wide specialty-free schedule. Even there, the absolute differences in the reimbursement levels are not large. They range from the 3.10 percent greater payments per unit to general practitioners to the 7.24 percent lower revenues for orthopedic surgeons. These data also reveal that when allowable payments for visits to internists are computed over all specialties rather than only over internists' charges, internists' revenue per visit-unit declines by 4.62 percent.

When group-specific fee schedules are not computed on an all-specialties basis, essentially the same pattern emerges. The data of Table 13 show that in each of the other grouping alternatives, average reimbursements will differ from specialty-specific fees by less than 7 percent, and most often by 3.3 percent or less. While the specific simulation specialties which are revenue gainers and losers varies by grouping method, the absolute magnitudes of these gains and losses are not large.

It should be recalled, however, that the differences between fees per unit computed on specialty-specific vs. group-specific bases for the simulation specialties are not as great, in the extreme, as those found among other specialties. As we reported in Table __, extreme differences in fees for simulation specialties did not exceed 7.24 percent while differences in fee schedule values for other specialties reached 12.1 percent.

While it might appear that our simulations underestimate the effects upon physicians' revenues associated with implementation of alternative fee schedules, any such underestimation is not likely to be large, especially for medical visit payments. As we reported, the most extreme differences between specialty-specific fees and other approaches to developing fee schedules are associated with specialties that provide only a small fraction of medical visit services, state-wide. Conversely, the six simulation specialties account for a considerable fraction of such procedures as the data of Table __ illustrate.

While medical visits are among the least dominated procedures, the distribution of visit episodes is not uniform across all 26 profile specialties. In fact, the six simulation specialties accounted for approximately 71.5 percent of medical visit units in the state. Furthermore, physicians in two specialties, general practice and internal medicine, delivered relatively large proportions of these services; 26 and 30 percent, respectively. In Table 14 we also report that visits constitute a substantial fraction of the services provided by general practitioners, internists, and family practitioners: 79 to 80 percent of their total practice volume for list procedures. Visits also account for a large, but not overwhelming, fraction of the services provided by the other simulation specialties.

Table 14

Medical Visits* Expressed as a Percent of

Specialty	(1) share of this specialty's procedures which are visits	(2) this specialty's share of total visits provided in the state
General Practice	80.3%	25.5%
Family Practice	80.2	6.7
General Surgery	41.2	4.5
Internal Medicine	79.0	29.5
Ophthalmology	25.1	2.2
Orthopedic Surgery	29.7	3.1

---

*Medical visits expressed in terms of the volume of CRVS-units provided by each specialty.

Therefore, our simulations involving six specialties will generate a fairly accurate portrait of the patterns of revenue gains and losses under alternatively constructed fee schedules. While some specialties not included in the simulation will undoubtedly experience shifts in revenues exceeding those of our six selected specialties, the latter account for the major share of the medical visits produced in the state.

Conclusions. Based on our analysis, the AMA grouping scheme was our method of choice for developing group-specific Medicare fee-schedules. That method overcomes--or at least does not share--several of the disadvantages inherent in the other grouping candidates, all of which were based upon historical charge data. By not basing fee schedule groupings of specialists upon past charge levels, we avoid the problem of building into the system any extraordinarily high or low rates of payment to individual specialties. In other words, we avoid the "groups" of single specialties--those charging the

most and least per unit--which characterized the standard deviation approach as well as some of the Ward's clusters that we did not report here.

The AMA method has the appeal of being based somewhat on the nature of the services provided and the training of the physician. Grouping on the basis of average charges using one of the other methods means that historical patterns are being recognized and reinforced. To the extent that some of these patterns are undesirable, Medicare could use its oligopsony power to correct them. In fact, these patterns may be partially the result of Medicare's previous reimbursement policies. The major dangers in trying to counter market forces are difficulties with beneficiaries' access to certain specialists, and with shifting of substantial portions of the cost of care to beneficiaries. We do not currently have the information to determine which historical patterns require modification. Nor do we have the capability to predict the access impacts which would result from physicians' behavioral responses to the imposition of a Medicare fee schedule.

The AMA method does have some problems. If a carrier uses it as the basis of specialty-group-specific fee schedules, it must find a way to incorporate specialties not explicitly included on the AMA listings. More to the point, the AMA category "other specialties" is somewhat unsatisfactory for our purposes. Perhaps carriers would want to reclassify some of these "other" specialties into additional groups.

The quartile or thirds methods are reasonable alternatives to the AMA group method. These are slightly preferred to the standard deviation approach since the latter is most useful in the case where the distribution of charges across specialties is approximately bell-shaped. The two former methods are not based upon the relationship between the mean and standard deviation of a

distribution, hence are meaningful for any distribution regardless of shape. The Ward's clustering approach gave results similar to the third's method but the latter is conceptually easier to explain and is the more straightforward approach.

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